Massachusetts Department of Public Health

COVID-19 Community Impact Survey(CCIS)

Preliminary Analysis Results as of March 10, 2021

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CCIS COMMUNITY PARTNERS

Many groups that were critical in the success of this effort and gave important input on the development and deployment of the survey:

- Academic Public Health Volunteer Corps and their work with local boards of health and on social media
- Mass in Motion programs, including Springfield,
 Malden, and Chelsea
- Cambodian Mutual Assistance
- The Mashpee Wampanoag Tribe
- The Immigrants' Assistance Center, Inc.
- Families for Justice as Healing
- City of Lawrence Mayor's Health Task Force

- The 84 Coalitions, including the Lawrence/Methuen Coalition
- Boys and Girls Clubs, including those in Fitchburg and Leominster and the Metro South area
- Chinatown Neighborhood Association
- Father Bill's
- UTEC
- MassCOSH
- Stavros Center for Independent Living
- Greater Springfield Senior Services

OVERVIEW

- 1. Purpose and Approach of the Covid-19 Community Impact Survey (CCIS)
- 2. Preliminary Findings
 - Ability to mitigate individual risk of infection
 - Access to Testing
 - Access to Healthcare
 - Impact on Social Determinants of Health
 - Mental Health
- 3. Converting these Data to Action with our partners
- 4. Appendix

PURPOSE AND APPROACH

BACKGROUND

Context

The pandemic is exacerbating pre-existing public health concerns and creating new health crises to address. Even people who have not become sick with COVID-19 are managing stress, uncertainty, and isolation during this challenging time. DPH and its partners need real time data to prioritize resources and inform policy actions.



Goal

DPH conducted a survey to understand the specific needs of populations that have been disproportionately impacted by the pandemic, including its social and economic impacts.



Actions

DPH will use and share these data to prioritize our pandemic response and to create new, collaborative solutions with community partners.





TESTING: How can we make access and awareness more equitable? Who doesn't know where/when to go? Who is still concerned about cost?



MENTAL HEALTH SUPPORTS - What should we deploy to meet acute needs?



RISK MITIGATION – Where can we eliminate unfair environmental barriers to social distancing?



WACCINE DEPLOYMENT: How should we prioritize certain occupations, populations, geographies, etc.? (eg. Who can't work from home? Who can't socially distance at work?)





YOUTH/SCHOOL SERVICES- What impacts are youth experiencing beyond educational delays (e.g., healthcare access, testing for teens in frontline occupations (e.g., grocery), protections for those that work directly with youth)?



RESUMING DELAYED CARE - What acute non-COVID health concerns are increasing? And for whom? (eg. Where do we need to lower barriers or communicate better to encourage folks not to delay care?)



PSA/COMMUNICATION - Who still "doesn't know" info we've pushed out and how can we better reach them?



ECONOMIC SUPPORT - Who is facing the biggest disparities in meeting basic needs? How does this intersect with areas like PPE, testing, etc.?



DEMOGRAPHICS

Age, geography, gender, race, ethnicity, sexual orientation, disability status, education, income



SAFETY

Intimate partner violence, discrimination



SUBSTANCE USE

Change in use, resource needs



PERCEPTIONS & EXPERIENCES OF COVID-19

Concern, access to testing, ability to social distance



BASIC NEEDS

Access to goods, services, information, social safety nets



ACCESS TO HEALTHCARE

Healthcare needs, types of care, barriers to care



CCIS DOMAINS

MENTAL HEALTH

Trauma, other mental health challenges, resource needs



EMPLOYMENT

Changes in employment, barriers to employment, ability to work from home, access to protections

OVERVIEW OF APPROACH

- Conducted an online survey between Sept. and Nov. 2020
- Available in 11 languages
- Employed a sampling strategy that ensured we reach key populations
- Weighted results to the state average
- Open ended questions captured previously unknown needs and barriers
- Recruited participants via network of community-based organizations (CBOs)

We intentionally worked to reach these Priority Populations:

- People of color
- LGBTQ+ individuals
- People with disabilities
- Essential workers
- People experiencing housing instability
- Older adults
- Individuals living in areas hardest hit by COVID-19

Recruitment efforts were overwhelmingly successful

- Over 33,000 adult respondents in the final sample
- More respondents from western and central MA, than in the entire statewide samples of past surveillance surveys* (eg. BRFSS).
- Compared to past surveillance surveys, CCIS priority population samples reached:
 - 10x as many Alaska Native/Native Americans
 - 10x as many LGBTQ respondents
 - o 5x as many residents who speak languages other than English
 - 5x as many Hispanic residents
 - 5x as many Asian residents
 - Over twice as many respondents in other populations including the deaf/hard of hearing and Black community
 - Additional Focus Groups were conducted with the Deaf/Hard of Hearing community

^{*}example comparison rates were calculated in comparison to the 2019 Behavioral Risk Factor Surveillance Survey (BRFSS) sample sizes

RESULTS TOPICS TO DATE









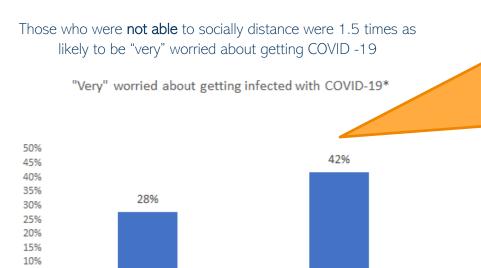




ABILITY TO MITIGATE INDIVIDUAL RISK OF INFECTION

RISK MITIGATION

Individuals who are the **most worried** about becoming infected with COVID-19 (see next slide), are also the **least able** to maintain 6 ft. distance from others especially when in retail/grocery stores and at work.



Unable to keep 6 feet distance

Able to keep 6 ft distance

Among those who were <u>not</u> able to keep 6 feet distance most respondents experienced at least 2 of the following top reasons why:

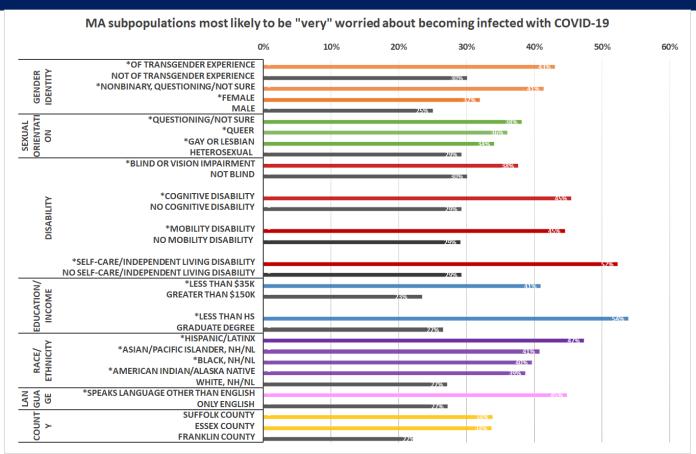
- "The place where I shop or buy groceries is crowded" (62%
- "In order to do my work, I need to be physically close to others" (42%)
- "My workplace is crowded" (23%)
- "The **streets** where I live are crowded" (20%)

5% 0%

^{*} Among those who do not leave the house, 71% were very worried about getting infected.

p<0.0001

RISK MITIGATION

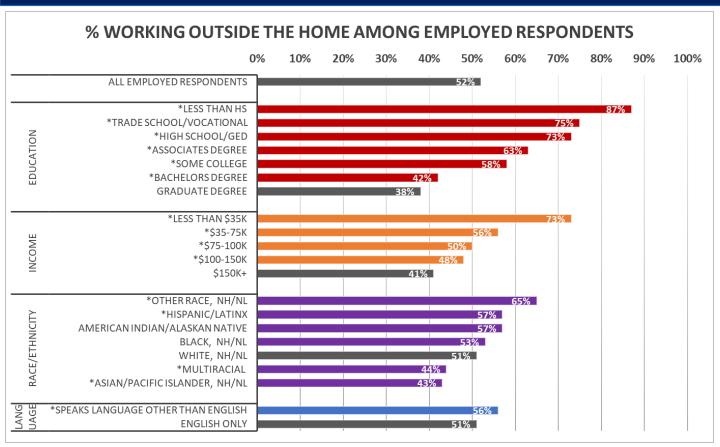


Populations most likely to say they are "very worried" about becoming infected with COVID-19 include:

- Respondents of **Transgender** experience
- Those who are **female** or **questioning** their gender identity
- LGBQ+ respondents
- Blind people and people with vision impairment
- People with cognitive, mobility, or self-care disabilities
- Respondents with lower income and/or lower educational attainment
- Persons of color, including Hispanic/Latinx, Asian/Pacific Islander, Black, and American Indian/Alaska Native
- Those who speak a language other than English

^{*} denotes rate is significantly different compared to the reference group. No significance testing done for County; County estimates are unweighted NOTE: American Indian/Alaskan Native includes Hispanic/Latinx. "Nonbinary, Questioning/Not Sure" gender identity group includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity.

Over half of those who could <u>not</u> socially distance listed <u>work-related</u> factors as a primary reason. Some populations were <u>much more likely to work outside</u> of the home and face <u>greater risk</u> of exposure.



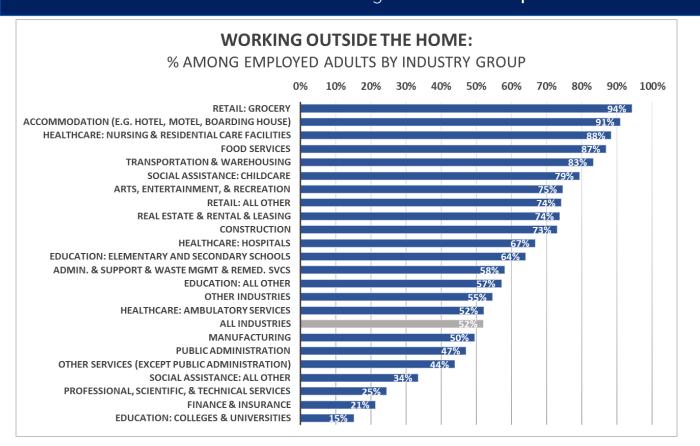
Half of all employed respondents worked a job outside the home, facing increased risk of exposure.

The following groups were more likely to work outside the home:

- Respondents with lower educational attainment
 - Respondents with lower annual household income
- Hispanic and Other race, nH/nL respondents
- Respondents who speak a language other than English.

Notes: 1) "nH/nL"=non-Hispanic/non-Latinx; 2) "American Indian/Alaskan Native" includes Hispanic/Latinx; 3) * denotes rate is significantly different compared to the reference group; 4) All percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts

Respondents in certain industry groups were much more likely to work outside of the home and thus face greater risk of exposure.



The percentage varied by industry ranging from 94% in Retail: Grocery to 15% in Education: Colleges and Universities

Even within certain industries, the percentage who worked outside the home varied by subgroup. For example in healthcare:

- 88% in Nursing and Residential Care Facilities
- 67% in Hospitals
- 52% in Ambulatory Services

PRELIMINARY FINDINGS – Statistical significance testing forthcoming.

RISK MITIGATION

Respondents working outside the home in the following industries* were less likely to have employer provided/implemented COVID-19 precautions such as personal protective equipment, COVID safety training, and implementation of social distancing at work:

- Food Services
- Construction
- Transportation and Warehousing

- Administrative Support and Waste Management Services
- Arts, Entertainment, and Recreation (e.g. gyms)



1 in 4 respondents worked in places that did not provide PPF



1 in 3 respondents worked in places that did not implement social distancing.



1 in 2 respondents worked in places that did not provide additional health & safety training.

Identifying infections early through **testing** and lowering barriers to staying home by providing employees with **adequate paid sick leave** is essential to mitigating the spread of COVID.



Adults who worked **outside the home** were more than **two times** as likely to report **testing positive** compared to those who worked from home.



Access to sick leave varied widely across industries, ranging from 37% in food services to 92% in public administration.

RISK MITIGATION

The behavior of individuals is one of the most powerful tools we have to stop the spread of COVID-19.

Our behaviors are influenced by:

1. Knowledge about what to do.

2. Belief that the behavior is important.

3. Factors that make the behavior easier or harder to engage in.



Among all respondents, 44% reported ever having been tested for COVID.

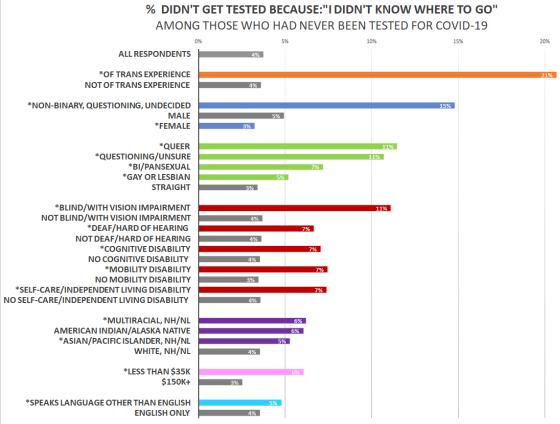
Key populations prioritized through Massachusetts testing initiatives like *Stop the Spread* program reported some of the highest rates of testing, suggesting that these efforts have been successful.

Priority Population	% Reported Ever Been Tested
Suffolk County residents	59%
Essex County residents	47%
Middlesex County residents	47%
Black, Non-Hispanic residents	52%
Hispanic/Latinx residents	51%
Residents who speak languages other than English	47%

Besides not having symptoms, the top reasons for not getting tested were:

TOP REASONS FOR NOT BEING TESTED	
Didn't meet testing criteria when had symptoms	
2. Didn't know where to go	
3. Lack of perceived exposure	
4. Only had mild symptoms	
5. Test was too expensive	
6. Test wasn't available where I wanted to get tested	

The STS program is currently addressing some of these top barriers through expansion of sites providing free testing regardless of symptoms/exposure.



Note: nH/nL = non-Hispanic/non-Latinx. Am. Indian/Alaska Native includes Hispanic/Latinx. Black nH/nL (4%) and Hispanic/Latinx (4%) not portrayed. * denotes rate is significantly different compared to the reference group.

The following groups were more likely to report not getting tested because they didn't know where to go:

- Respondents of Transgender Experience
- Males, Non-binary respondents and those questioning their gender identity**
- LGBQ people
- Respondents with disabilities
- Am. Indian/Alaska Native, Multiracial, and Asian/Pacific Islander respondents
- Respondents with lower income
- Respondents who speak languages other than English

...suggesting that current communication and dissemination channels may not be as effective at reaching these populations

^{**}Non-binary, Questioning, Undecided' includes only respondents who identified as: non-binary, genderqueer, not exclusively male or female, or questioning/ unsure of their gender identity.



HEALTH CARE ACCESS & DELAYS

HEALTH CARE ACCESS & DELAYS

The pandemic has substantially impacted normal healthcare operations and put stress on healthcare capacity.



4 of **5** respondents who needed medical care since July 2020 have gotten the care that they needed.

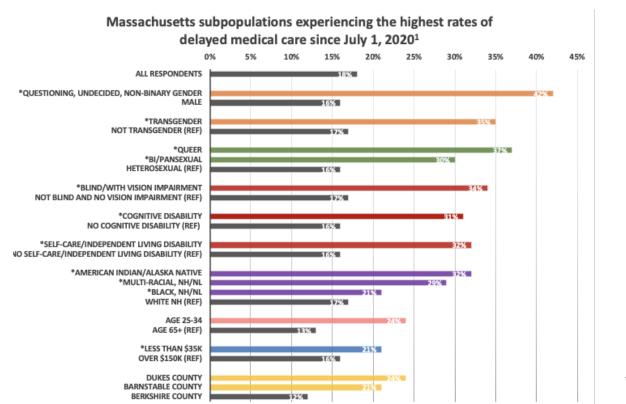


60% of those who needed care received telehealth care via phone or video, suggesting that the rapid scale-up of telehealth has been crucial.



However, **1** Of **5** respondents are missing either critical **urgent care** or **essential routine care**. Some residents have missed **both**.

HEALTH CARE ACCESS & DELAYS



Delayed care (both urgent and routine) is **over 1.5X to 2X** as high among subgroups that already face many healthcare barriers such as cost, transportation, English proficiency, and discrimination:

- Respondents with questioning, undecided, non-binary gender **
- Respondents of transgender experience
- LGBQA respondents
- Respondents with **disabilities**
- Am. Indian/Alaska Natives, Black, and Multiracial respondents
- Younger respondents
- Those with lower incomes
- Those in certain counties.

^{**}Includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

¹Among respondents who said they have needed care since July 1, 2020. Overall, about 80% of respondents have needed care.

^{*} denotes rate is significantly different compared to the reference group, No significance testing done for County and County estimates are unweighted Note: nH/nL = non-Hispanic/non-Latinx; American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

DELAY IN EMERGENCY OR URGENT CARE

Delays in seeking or receiving emergency care for acute conditions like pain, chronic disease flare-ups, or severe mental health can lead to serious health consequences...

...yet **nearly 1 in 3 respondents** who had delayed care reported having an acute condition delayed.

TOP 5 ACUTE CONDITIONS DELAYED

- 1. Pain (e.g. chest pain, stomach pain, headaches, back pain)
- **2. Chronic disease flare-ups** (e.g. diabetes, uncontrolled asthma, cardiovascular conditions, GI, lupus)
- **3. Severe mental health** (e.g. severe stress, depression, nervousness, anxiety)
- 4. Oral or dental pain
- 5. Non work-related Injury

The pandemic has drastically disrupted healthcare capacity even for people who normally face few barriers to care.

However, access concerns were still felt <u>most acutely</u> by populations who already faced healthcare barriers prior to the pandemic, and have the highest rates of delayed urgent care now.

TOP 5 REASONS FOR DELAYED URGENT CARE

- 1. My appointment was cancelled/delayed
- **2**. The office was **closed**, told no appointments available, or no one responded to my phone calls
- 3. I was worried about getting COVID-19 from in-person care
- **4**. I was worried I **could not afford** the care or my **insurance** didn't cover it
- 5. I didn't have time or had caretaking responsibilities

DELAY IN ESSENTIAL AMBULATORY CARE

Essential ambulatory care services are also being delayed, and among those who need them the most.



Nearly 1 in 3 women who reported delaying regular care said they experienced delays in services like OB/GYN care and sexual and reproductive health care (e,g. birth control or STI).



Nearly 1 in 3 individuals with 1 or more chronic conditions (e.g. asthma, diabetes, obesity) who reported delaying regular care said they had delays for chronic disease management services.

<u>Limited healthcare capacity</u> was the #1 reason people could not access ambulatory care.

(e.g. office or clinic is closed or told no appointments available, certain services or procedures were being limited and not available, appointment was cancelled, delayed or the wait was too long, etc.)

DELAY IN ESSENTIAL AMBULATORY CARE

Although 60% of respondents who needed care were able to get care via <u>telehealth</u> (by phone or video), technology-related barriers <u>remain a challenge</u> for certain populations.

"I didn't have good enough phone or internet connection"

"I didn't have a phone, tablet, or computer"

"I didn't have a private place for a phone call or video chat"

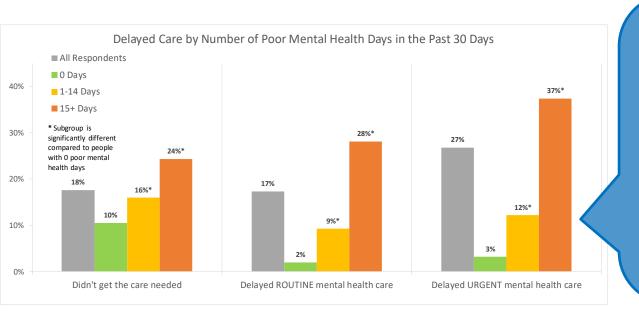


These populations were 2X to 4X as likely to have telehealth-related barriers:

- Respondents with less than HS education or less than \$35K income
- American Indian/Alaska Natives, Hispanic/Latinx, and Multi-racial respondents
 - Residents of Franklin county

DELAY IN MENTAL HEALTH CARE

The respondents with 15+ days of poor mental health are also the most likely to experience delays in both routine and urgent mental health care.

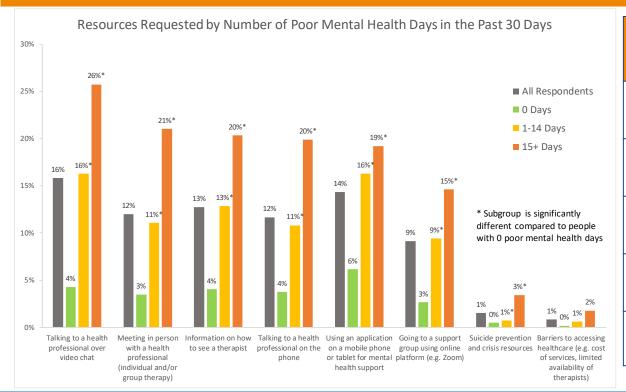


TOP 5 REASONS FOR DELAYED CARE BY RESPONDENTS WITH POOR MENTAL HEALTH

- My appointment was cancelled/delayed (59%)
- 2. I was worried about getting COVID-19 from in-person care (27%)
- 3. I was worried I could not afford the care or my insurance didn't cover it (8%)
- 4. I did not have a private place for a phone call or video chat (7%)
- 5. I did not have safe transportation to get to my appointment (7%)

REQUESTED MENTAL HEALTH RESOURCES

Respondents with 15+ days of poor mental health are seeking health resources at higher rates compared to those who experienced "0" days or "1-14" days of poor mental health.



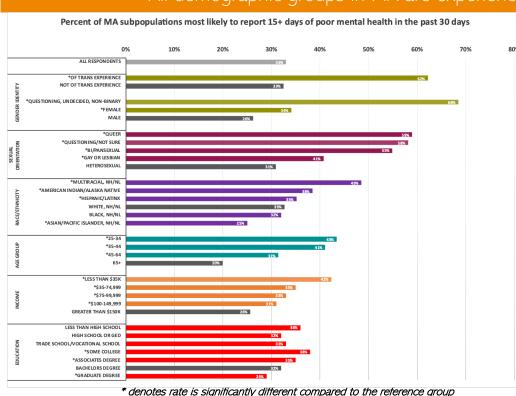
TOP 5 RESOURCES REQUESTED by respondents with poor mental health

- 1. Talking to a health professional over video chat
- 2. Meeting in person with a health professional (individual and/or group therapy)
- 3. Information on how to see a therapist
- 4. Talking to a health professional on the phone
- **5.** Using an application on a mobile phone or tablet for mental health support

MENTAL HEALTH STATUS

1 in 3 of MA adults reported 15+ days of poor mental health.

All demographic groups in MA are experiencing increases in poor mental health.



The percentage of adults who reported poor mental health on this survey is **3X higher** than the 11% of adults who reported poor mental health on the 2019 MA BRFSS

In this survey, the following groups experienced the highest rates of 15+ days of poor mental health:

- Respondents with disabilities
- Respondents of transgender experience, non-binary respondents, and respondents questioning their gender identity
- LGBQ+ respondents
- Multiracial, nH/nL, American Indian/Alaska Native, and Hispanic/Latinx respondents
- Caregivers of persons with special needs
- Respondents between ages 25-34
- Respondents with income <\$35k

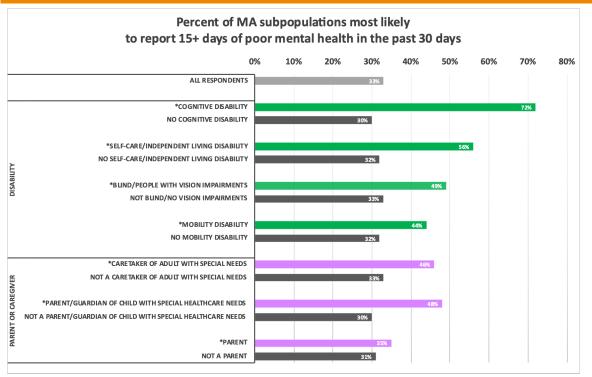
Notes on subpopulations:

- nH/nL = non-Hispanic/non-Latinx
- 'American Indian/Alaska Natives' includes Hispanic/Latinx
- 'Questioning, Undecided, Non-Binary' includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

MENTAL HEALTH STATUS, CONT.

1 in 3 of MA adults* reported 15+ days of poor mental health.

All demographic groups in MA are experiencing increases in poor mental health.



Of the subpopulations experiencing high rates of poor mental health, **respondents with disabilities** reported the highest rates of 15+ days of poor mental health

Almost 1 in 2 caregivers of persons with special needs and parents of children with special healthcare needs are experiencing high rates of poor mental health

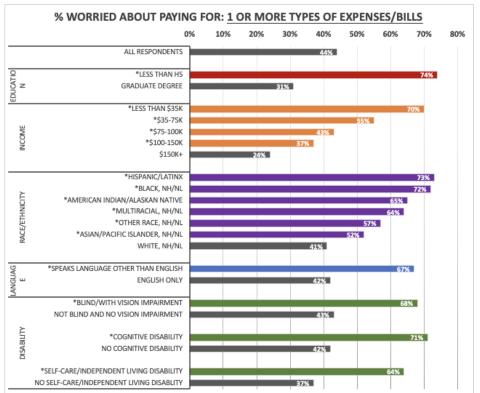
^{*} denotes rate is significantly different compared to the reference group



SOCIAL DETERMINANTS OF HEALTH

DETERMINANTS OF HEALTH: EXPENSES

A regular income is critical in order to afford essential medication, food, and health services, but some populations in the commonwealth have been harder hit by employment-related changes than others. Even before the pandemic, these same populations also had less financial reserve as a safety net.



EXPENSES/BILLS RESPONDENTS WERE MOST CONCERNED ABOUT PAYING	% of Respondents
Housing (rent, mortgage, property taxes, condo fees, housing insurance)	28%
2. Utilities (cable, cell, electricity, water, gas, heating)	24%
3. Debt (credit card, student loan, bank fees)	21%
4. Vehicle (lease, car loan payment, car insurance)	15%
5. Insurance (health, disability, life)	11%

Groups experiencing the greatest economic hardship:

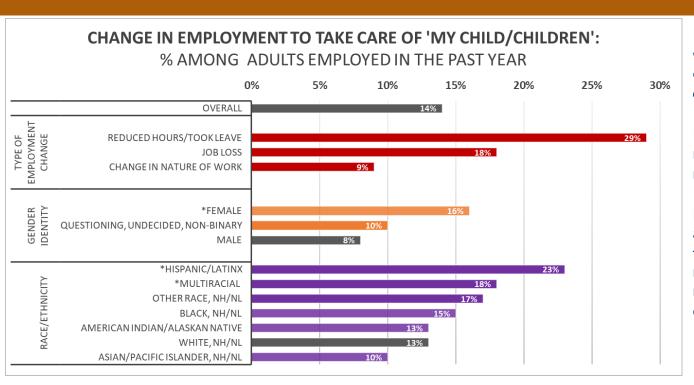
- Low income & low education respondents
 - Respondents who are non-White
 - Respondents who speak languages other than English

- Blind/with vision impairment
- With Cognitive disability
- With Self-care/independent living disability

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

^{*} denotes rate is significantly different compared to the reference group Note: nH/nL = non-Hispanic/non-Latinx;

DETERMINANTS OF HEALTH: CHILDCARE



Nearly 1 in 3 of employed respondents who reduced their hours or took leave did so, at least in part, to take care of children.

Nearly 1 in 5 who lost their jobs cited needing to take care of children as a reason.

Females were twice as likely as males, and Hispanic/Latinx respondents almost twice as likely as White, nH/nL respondents to change the status or nature of their employment to take care of children.

Notes: 1) "Questioning, Undecided, Non-binary" includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity; 2) "nH/nL"=non-Hispanic/non-Latinx; 3) "American Indian/Alaskan Native" includes Hispanic/Latinx; 4)* denotes rate is significantly different compared to the reference group; 5) All percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts

DETERMINANTS OF HEALTH: FOOD



Food insecurity is directly associated with mortality from obesity, hypertension, diabetes, and heart disease, which are all also risk factors for more severe COVID-19 illness and mortality.

Economic hardship brought on or exacerbated by the pandemic means that people may not be able to afford purchasing enough food or healthy food for themselves and their family. The pandemic has also made accessing groceries more challenging than before, especially among those without safe transportation and those more vulnerable to COVID-19.

More than 1 in 4 (28%) respondents worried about getting <u>food or groceries</u> in the coming weeks. However, some populations and communities reported <u>much higher rates</u>:

DISABILITY	%
Blind or hard of seeing	53%
Physical or mental disability	46%
SES	%
SES Less than a HS education	% 56%

ETHNICITY	%
Salvadoran	62%
Dominican	62%
Colombian	53%
Cape Verdean	51%
Puerto Rican	49%

ETHNICITY	%
Haitian	48%
Vietnamese	48%
Caribbean Islander	46%
Am. Indian/Alaska Native	45%

DETERMINANTS OF HEALTH: BROADBAND



Fast, stable and affordable internet access has become more critical than ever in connecting people to telehealth, work, remote learning, and essential goods and services.

Yet, accessing broadband remains a challenge for many residents. Barriers to access can include lack of broadband infrastructure in many rural areas and lack of affordable options for many urban families. Furthermore, public spaces like offices, schools, and libraries that once served as many residents' only connection to accessing internet are currently shut down.

1 in 7 (13%) respondents worried about getting <u>internet</u> in the coming weeks. However, some populations and communities were <u>more likely to be concerned</u>:

DISABILITY	%
Blind or hard of seeing	27%
Physical or mental disability	23%
SES	%
SES Less than a HS education	% 27%

ETHNICITY	%
Dominican	28%
Puerto Rican	26%
Am. Indian/Alaska Native	25%
Caribbean Islander	25%
Columbian	25%

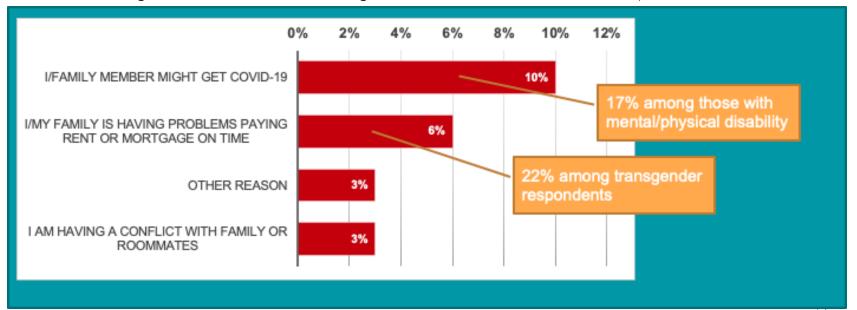
ETHNICITY	%
Cape Verdean	24%
Hispanic	24%
Salvadoran	23%
Vietnamese	23%
Haitian	20%

DETERMINANTS OF HEALTH: HOUSING STABILITY

1 in 5 respondents worried that they would have to move out of their home soon.

Among them:

- The most common reason was if they or a family member got COVID-19.
- Nearly 30% said they would need a safe place to stay.
- 25% said having information about their rights as renters/tenants would help.





MENTAL HEALTH

MENTAL HEALTH INDICATORS

Two aspects of Mental Health were captured by the survey:

How has the pandemic impacted the mental health of all residents?

- Adapted from "Primary Care PTSD Screen for DSM-5 (PC-PTSD-5)*"
- "3+ PTSD-like reactions" Respondents were asked how many PTSD related reactions to the pandemic they had experienced in the past month from a validated list of reactions.



How have residents with the most persistent poor mental health been impacted by the pandemic?

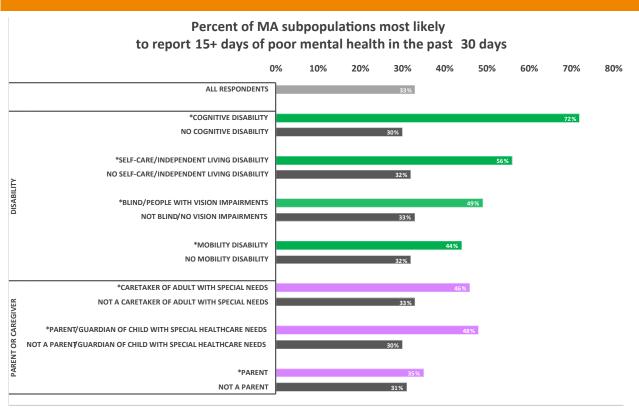
- Standard item from the CDC Behavioral Risk Factor Surveillance System**
- "15+ days of poor mental health" Respondents were asked how many days
 during the past 30 days their mental
 health was not good, which includes stress,
 depression, and problems with emotions

^{*} See Appendix for more details; Reference: Prins, A., Bovin, M. J., Kimerling, R., Kaloupek, D. G, Marx, B. P., Pless Kaiser, A., & Schnurr, P. P. (2015). Primary Care PTSD Screen for DSM-5 (PC-PTSD-5) [Measurement instrument]. Available from https://www.ptsd.va.gov

^{**} Reference: Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Questionnaire. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention

MENTAL HEALTH STATUS

All demographic groups in MA are experiencing increases in poor mental health.



Rates are **3X higher** than the 2019 MA BRFSS.

With 1 in 3 MA adults reported 15+ days of poor mental health in the past 30 days.

Of the subpopulations experiencing high rates of poor mental health, **respondents** with disabilities reported the highest rates of 15+ days of poor mental health

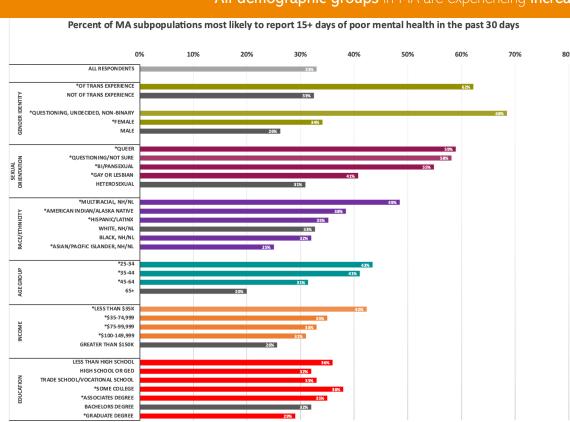
• This was true across all categories

Almost 1 in 2 caregivers of persons with special needs and parents of children with special healthcare needs are experiencing high rates of poor mental health

^{*} significant at the p<0.05 level as compared to the grey referent group in each cluster

MENTAL HEALTH STATUS CNTD.

All demographic groups in MA are experiencing increases in poor mental health.



The groups reporting the highest rates of poor mental health include:

- Respondents of transgender experience, non-binary respondents, and respondents questioning their gender identity
- LGBQ+ respondents
- Multiracial, nH/nL, American Indian/Alaska Native, and Hispanic/Latinx respondents
- Younger respondents
- Respondents with low income <\$35k
- Those with lower educational attainment

These are the same demographic groups who were more likely to have 3+ PTSD-like reactions in the past 30 days, with the exception of the Hispanic/Latinx race group which was not statistically significant.

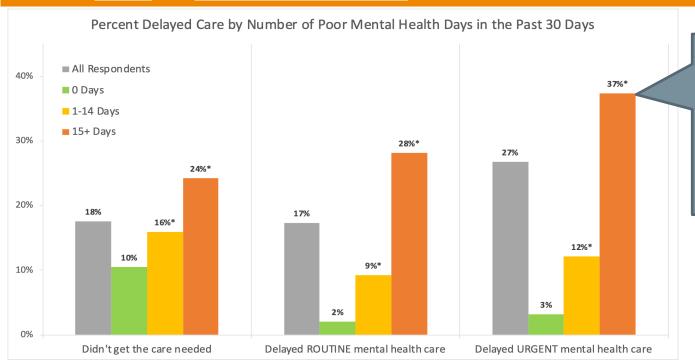
1 in 4 adults reported 3+ PTSD-like reactions.

Notes on subpopulations:

- nH/nL = non-Hispanic/non-Latinx
- 'American Indian/Alaska Natives' includes Hispanic/Latinx
- 'Questioning, Undecided, Non-Binary' includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity
- * significant at the p<0.05 level as compared to the grey referent group in each cluster $\mathbf{43}$

DELAY IN HEALTH CARE

Respondents who reported any days of poor mental health were more likely to experience delayed care, including <u>routine</u> and <u>urgent mental health care</u>, compared to those who reported 0 days of poor mental health.



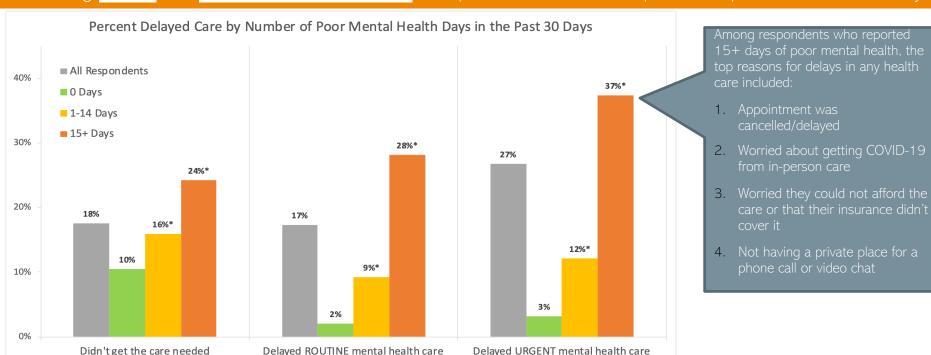
Among respondents who reported 15+ days of poor mental health, the following roups experienced delayed urgent mental health care at the highest rates:

- Bisexual/Pansexual respondents
- Respondents with Cognitive Disabilities
- Respondents between ages 25-44

^{*} subgroup is significantly different compared to respondents with 0 poor mental health days at the p<0.05 level NOTE: Similar results were seen when comparing delays in care by the number of PTSD-like reactions to COVID-19.

DELAY IN HEALTH CARE, CONT.

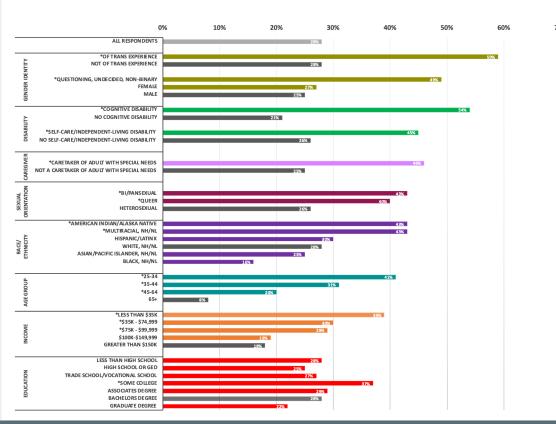
Respondents reporting poor mental health were more likely to experience delayed care, including <u>routine</u> and <u>urgent mental health care</u>, compared to those who reported no poor mental health days.



^{*} subgroup is significantly different compared to respondents with 0 poor mental health days at the p<0.05 level NOTE: Similar results were seen when comparing delays in care by the number of PTSD-like reactions to COVID-19.

DELAY IN ROUTINE MENTAL HEALTH CARE

Percent of MA subpopulations who delayed <u>routine</u> mental health care among those who reported 15+ days of poor mental health



Almost 30% of adults who reported 15+ days of poor mental health experienced delayed <u>routine</u> mental health care.

Among adults who reported 15+ days of poor mental health, the following groups delayed <u>routine</u> mental health care at the highest rates:

- Respondents of transgender experience, non-binary respondents, and respondents questioning their gender identity
- Respondents with disabilities
- Caregivers of adults with special needs
- Bi/Pansexual and queer respondents
- American Indian/Alaska Native and Multiracial, nH/nL respondents
- Respondents between ages 25-34
- Respondents with income <\$35k and those with some college experience

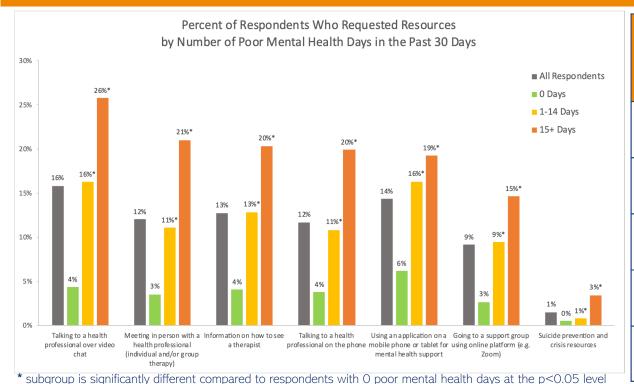
Notes on subpopulations:

- nH/nL = non-Hispanic/non-Latinx
- 'American Indian/Alaska Natives' includes Hispanic/Latinx
- 'Questioning, Undecided, Non-Binary' includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

 $[\]mbox{*}$ significant at the p<0.05 level as compared to the grey referent group in each cluster

REQUESTED RESOURCES

Respondents who reported poor mental health were **5-7 X** more likely to request health resources compared to those who reported no days of poor mental health.



TOP 5 RESOURCES REQUESTED among respondents with 15+ days of poor mental health

- 1. Talking to a health professional over video chat
- 2. Meeting in person with a health professional (individual and/or group therapy)
- 3. Information on how to see a therapist
- 4. Talking to a health professional on the phone
- **5.** Using an application on a mobile phone or tablet for mental health support

1/

SUICIDE PREVENTION RESOURCES

Requests for suicide prevention and crisis management resources were as high as 11% among certain subpopulations.

Among all survey respondents, about **2%** requested resources for suicide prevention and crisis management.

The groups that reported the highest need for suicide prevention and crisis management resources were:

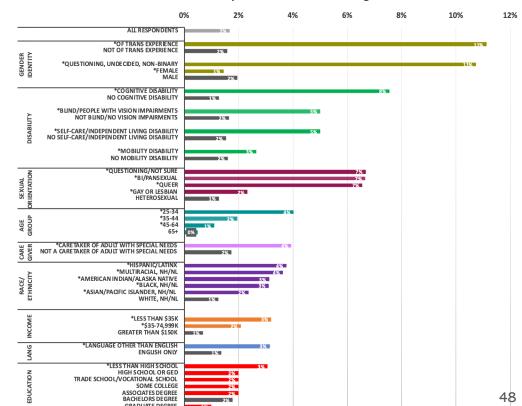
- Respondents of transgender experience, non-binary respondents, and respondents questioning their gender identity
- Respondents with disabilities
- LGBQ+ respondents
- Respondents ages 25-34
- Caretakers of adults with special needs
- Hispanic/Latinx respondents
- Respondents with lower incomes
- Those who speak a language other than English
- Those with low educational attainment

Many of these groups also reported higher rates of poor mental health across both indicators

Notes on subpopulations:

- nH/nL = non-Hispanic/non-Latinx
- 'American Indian/Alaska Natives' includes Hispanic/Latinx
- 'Questioning, Undecided, Non-Binary' includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity
- $\ensuremath{^*}$ significant at the p<0.05 level as compared to the grey referent group in each cluster

Percent of MA subpopulations most likely to request resources for suicide prevention and crisis management



RESPONDENTS WITH POOR MENTAL HEALTH

Those who reported 15+ days of poor mental health were much more likely to impacted by social determinants of health, when compared to respondents who experienced 0 days of poor mental health,



2x more likely to have **delay in** health care



2-3x more likely to worry about the following basic needs: **healthcare**, **technology**, **and childcare**



2.4x more likely to have change in employment to take care of child/children



2.5X more likely to worry about expenses/bills



2.6x more likely to worry about getting medication



2x more likely be "very worried" about **getting covid-19**



2-3X more likely to request resources that would be helpful to them

DATA TO ACTION

DATA TO ACTION

We are getting input from both internal and external stakeholders in order to convert these data to action.

INTERNAL GROUPS

Established a Data to Action (DTA)
Workgroup to convene Bureaus, Offices,
work groups etc. in integrating findings
into DPH actions.

Eg. integrate population specific lessons learned into the launch of the Targeted Community Outreach initiative among the top 20 impacted towns/cities

COLLABORATORS

We are eliciting input from our advisory groups (eg. PHC, HEAG) to help us interpret and identify possible actions resulting from the data.

Eg. improve accessible options on the vaccine website after hearing from external partners that existing measures still posed accessibility barriers

LOCAL PARTNERS

We are also providing the data presented here by granular geographies, and populations. to equip our local partners in tailoring their own pandemic response.

Eg. Providing data by race, ethnicity groups, sexual orientation, gender identity transgender status, types of disability, income, education, language spoken, geography, rural cluster, age, etc.

ENGAGEMENT - EXAMPLE

<u>Key Finding</u>: Current communication and dissemination channels may not be equally effective at reaching all populations (eg. Transgender, LGBQ+, Males, those with disabilities, Am. Indian/Alaska Natives, Multiracial, Asians, low income, and those who speak languages other than English).

...suggesting adjusted media strategies, translations, and tailored community engagement should be considered for vaccine related communications to better reach these communities.

Heard: COVID-19 vaccine map on mass.gov is not accessible, need a table/grid with same information

Action Taken: Word and Excel document available for download, Word document could be hard to read, working to improve it now

Heard: Not all Indigenous people are represented in this work, would prefer that DPH bring what they are planning to address needs to Indigenous people to provide feedback and make suggestions

Action Taken: Engage Tribal Partners Group, to discuss how best to do this (added to 2/16 meeting agenda)

COMMUNICATION / PSAs

How can we utilize alternative channels to reach key populations (not currently being reach)? What modes to use?



How can we help people access needed supports, services, and resources?



HEALTH LITERACY & TRUST

How can we craft understandable messaging that also addresses concerns and fears not just recommended actions?



SDOH OVERLAP

How do we address the multiple layers of barriers and burden?





HEALTHCARE CAPACITY

How can we increase appointments, telehealth infrastructure, culturally competent providers, CHWs?



ACCESSIBILITY

How can we improve accessibility of information and services (e.g., language, technology, cultural competence of providers)?



TELEHEALTH & TECHNOLOGY

How can we reduce technology-related barriers to accessing services?



EMPLOYMENT

How can we promote more equitable worker protections (physical conditions, testing, and benefits/leave)?

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3.10.21 release

APPENDIX

Note: results are only weighted to the state average, and as such should be interpreted with caution when comparing across smaller geographies or special populations



DEMOGRAPHICS

Age, geography, gender, race, ethnicity, sexual orientation, disability status, education, income



SAFETY

Intimate partner violence, discrimination



SUBSTANCE USE

Change in use, resource needs



PERCEPTIONS & EXPERIENCES OF COVID-19

Concern, access to testing, ability to social distance

CCIS DOMAINS



BASIC NEEDS

Access to goods, services, information, social safety nets



ACCESS TO HEALTHCARE

Healthcare needs, types of care, barriers to care



MENTAL HEALTH

Trauma, other mental health challenges, resource needs



EMPLOYMENT

Changes in employment, barriers to employment, ability to work from home, access to protections

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Demographics

What city or town do you live in?

How many people - adults and children - currently live with you, including yourself?

How many people who are over 60 years old currently live with you, including yourself?

Are you a caretaker of an adult(s) with special needs in your household?

Are you a parent/guardian of a child or youth with special health care needs?

Please select all that apply to you:

- I am deaf or hard of hearing.
- I am blind or I have trouble seeing even when I am wearing glasses.
- I have trouble concentrating, remembering, or making decisions because of a physical, mental, or emotional condition.
- I have trouble walking or climbing stairs.
- I have trouble getting dressed or taking a bath or shower.
- I have difficulty doing errands alone such as visiting a doctor's office or shopping.
- None of the above apply to me.

Were you pregnant during the COVID-19 outbreak or did you give birth since February 2020?

When did you give birth?

After the start of the COVID-19 outbreak, did your birth plans change?

What is the highest grade or year of school you have finished?

In 2019, what was your total annual household income before taxes?

Have you ever been sentenced to stay overnight or longer in any type of corrections institution? Examples include a jail or prison.

What is your sexual orientation?

What is your current gender identity?

Are you transgender or of transgender experience?

Are you Hispanic or Latino?

Demographics

What is your race? Select all that apply.

What is your ethnicity? Select all that apply.

(For English Survey) Do you speak language(s) other than English at home?

Which language(s) do you speak at home?

(For Non-English Surveys) How well do you speak English?

Perceptions & Experiences of COVID-19

How worried are you about getting infected with COVID-19 in Massachusetts?

Please select the two sources that you go to for the most reliable and up-to-date information about COVID-19.

When you are outside of the home are you able to keep 6 feet between yourself and others?

Why not? Check all that apply

Perceptions & Experiences of COVID-19

Do you agree or disagree with the following statements? My community is receiving adequate support to:

- Prevent the spread of COVID-19
- Protect workers from COVID-19
- Ensure medical facilities have the capacity to treat everyone who is sick or injured?
- Help people who have lost income
- Help businesses recover

Have you had fever and/or cough or shortness of breath and/or muscle aches or loss of sense of taste or smell in the last 30 days?

Did you ever get tested for COVID-19?

Why didn't you get tested? Select all that apply.

Have you or anyone you know tested positive for COVID-19? Select all that apply.

Has someone close to you died from COVID-19?

Healthcare Access

Do you currently have any of the following health conditions? Select all that apply.

Since July 1, 2020, what has been your experience with trying to see a doctor, counselor or another medical professional? Select all that apply.

For the care you did not get, why did you want to see a doctor or counselor at that time? Select all that apply.

What type(s) of regular care or check-up did you need at that time? Select all that apply.

What condition(s) did you need emergency or urgent care for at the time? Select all that apply

Why were you not able to get care at the time? Select all that apply.

What type(s) of health insurance do you currently have? Select all that apply.

Has your health insurance changed since the COVID-19 outbreak?

Basic Needs

Which of the following basic needs are you worried about getting for you and your family? This could be now or in the next couple of weeks. Select all that apply.

- Household Items
- Healthcare and medication
- Technology
- Childcare supplies
- Other

Which of these would be helpful to you right now? Select all that apply. (Food, help getting benefits, knowledge about rights, accessible services – translation, disability, childcare, other)

Which types of expenses or bills are you most worried about paying in the next few weeks?

Are you worried about any of these that will require you to move out of where you live in the next few months? Select all that apply

Have you applied to any of these financial supports since the beginning of the COVID-19 outbreak? What is the status of your application?

Mental Health

Now thinking about your mental health, which includes stress, depression, and problems with emotions, on how many days during the past 30 days was your mental health not good?

In the past month, have you had three or more of the following reactions to things you've seen, heard, or experienced related to the COVID-19 outbreak:

- Had nightmares or thought about it when you did not want to?
- Tried not to think about it or went out of your way to avoid situations that reminded you of it?
- Been constantly on guard, watchful, or easily startled?
- Felt numb or detached from people, activities, or your surroundings?
- Felt guilty or unable to stop blaming yourself or others for it or any problems it may have caused?

Which of these resources would be most helpful to you right now to help you with your mental health and well-being? Select all that apply.

Substance Use

During the past 30 days, have you used any of the following products Select all that apply.

Compared to before the COVID-19 outbreak (February 2020), how often are you using these products now?

Which of the following resources would be most helpful to you right now? Select all that apply.

Employment/Income

Which of the following best describes your current work situation? (Employed, Retired, unemployed, furloughed, etc.)

What kind of work do/did you do? For example, registered nurse, janitor, cashier, auto mechanic. If you have more than one job, please answer for your primary job.

What kind of business do you work in? For example, hospital, elementary school, manufacturing, restaurant. If you have more than one job, please answer for your primary job.

Employment/Income

Has your employer given you any of the following to protect you against COVID-19? Select all that apply.

If you are currently working, do you have paid sick leave you can use through your employer?

Was your employment status or the nature of your work changed in any of the following ways due to COVID-19? Select all that apply.

Why did your employment status or the nature of your work change? Select all that apply

Safety

Since COVID-19 began (March 10, 2020), has someone you were dating or married to physically hurt you? (i.e. being shoved, slapped, hit, kicked, punched, strangled, forced into sexual activity, or anything that could have caused an injury)

Since COVID-19 began (March 10, 2020), has someone you were dating or married to done any of the following: monitored your cell phone, called or texted you a lot to ask where you were, stopped you from doing things with friends, been angry if you were talking to someone else, or prevented you from going to school or work (including remotely)?

For which of the following topics would online support be most helpful to you or someone you know right now? Please select all that apply:

Discrimination can refer to harmful words and behaviors aimed at you because of your race or ethnicity. Since the COVID-19 outbreak began (March 10, 2020), have you experienced any form of discrimination because of your race or ethnicity?

In what way(s) did you experience discrimination?

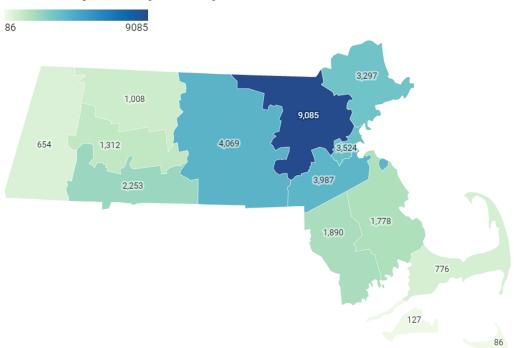
Recruitment among priority populations was unprecedented

Priority Populations	2018 MA BRFSS	2020 CCIS Final Sample	Magnitude of Difference
Overall sample	6,669	33,948	5X
Race/Ethnicity			
Hispanic	522	2,506	5X
Black NH	365	1,162	3X
Asian NH	248	1,188	5X
Amer. Ind/Alaska Nat	35	351	10X
Disability Status			
Deaf/Hard of hearing	427	922	2X
Blind/Hard to see	258	236	On par
Lesbian, Gay, Bisexual	359	3,931	10X
Non-English Speakers	158 (in 2 languages)	829 (in 8 languages)	5X

This number of responses will enable us to conduct the critical subanalysis needed to understand the specific needs and experiences of these groups and to prioritize our deployment of resources to address them.

Recruitment efforts were overwhelmingly successful

CCIS Response by County



For example, more people responded from western and central MA alone, than in the entire 2019 BRFSS statewide sample.

Demographics of the sample

	Demographics	Freq.	Percent
	<25*	148	0.44
	25-35	6,726	19.81
Age	36-49	11,785	34.71
	50-64	10,012	29.49
	65+	5,277	15.54
	Am Indian/Alaska Native	351	1.03
	Hispanic/Latinx	2,506	7.38
	Multiracial, nH/nL	475	1.40
Race/Ethnicity	Asian/Pacific Islander, nH/nL	1,188	3.50
	Black, nH/nL	1,162	3.42
	White, nH/nL	27,605	81.32
	Unknown/Other	661	1.95
	Male	6,520	19.21
	Female	26,518	78.11
Gender	Non-Binary	392	1.15
	Prefer not to answer	518	1.53
Transgender Identi	Of transgender experience	245	0.73
ty	Not of transgender experience	32,500	96.29
	Not sure/Dont know/refused	1,007	2.98
Commenters	English	33,119	97.56
Survey Lang.	Other	829	2.44

	Demographics	Freq.	Percent
	Asexual	646	1.92
	Bisexual	1,252	3.73
	Gay/Lesbian	1,352	4.03
Sexual Orientation	Heterosexual	29,231	84.08
	Queer	464	1.38
	Questioning	217	0.65
	Other/DK/refuse	1,414	4.21
	Deaf/Hard to hear	920	2.72
	Blind/With vision impairement	233	0.69
Disability Status	Cognitive disability	1,588	4.70
	Mobility disability	1,622	4.80
	Self-care/Independent living disability	912	2.70
	<\$35K	3,961	12.54
	\$35-74,999K	7,163	22.67
Income	\$75-99,999K	4,532	14.34
	\$100-149,999K	6,851	21.68
	\$150K+	9,089	28.77
	Less than HS	446	1.32
	High school or GED	2,279	6.73
	Trade /Vocational	905	2.67
Education	Some college	2,798	8.26
	Associates degree	2,484	7.33
	Bachelor's degree	10,635	31.39
	Graduate degree	14,338	42.31



ABILITY TO MITIGATE INDIVIDUAL RISK OF INFECTION

% "Very Worried" about Being Infected with COVID-19

	Demographics	Frequency	Weighted %
	Overall	9241	30%
	American Indian/Alaska Native	120	39%
	Hispanic/Latinx	1029	47%
	Multiracial, nH/nL	148	34%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	398	41%
	Black, nH/nL	424	40%
	White, nH/nL	6947	27%
	Other Race, nH/nL	88	29%
	Unknown Race	87	27%
	25-34	1556	31%
	35-44	2339	30%
Age	45-64	3775	30%
	65+	1571	30%
	Male	1460	25%
Gender	Female	7501	31%
Identity	Questioning, Undecided, Non- binary	149	41%
	Asexual	202	33%
	Bisexual and/or Pansexual	373	32%
Sexual	Gay or Lesbian	425	34%
Orientation	Straight (Heterosexual)	7450	29%
	Queer	155	36%
	I am questioning / not sure of my sexuality	71	38%

	Demographics	Frequency	Weighted %
Transgender	Of transgender experience	97	43%
Experience	Not of transgender experience	8801	30%
	<\$35K	1459	41%
	\$35-74,999K	2129	31%
Income	\$75-99,999K	1238	28%
	\$100-149,999K	1684	24%
	\$150K+	2020	23%
	Less than high school	197	54%
	High school or GED	735	34%
Educational Attainment	Trade/ vocational school	255	29%
Attainment	Some college	864	33%
	Associates Degree	705	30%
	Bachelors Degree	2690	27%
	Graduate Degree	3773	27%
	Deaf/Hard of hearing	296	31%
	Blind/Vision Impairment	84	38%
Disability	Cognitive Disability	664	45%
	Mobility Disability	696	45%
	Self- care/independent living disability	453	52%
English language	Speaks language other than English	1973	45%

	Demographics	Frequency	Unweighted %
	Barnstable	189	25%
	Berkshire	155	25%
	Bristol	532	29%
	Dukes	31	25%
	Essex	1051	34%
	Franklin	216	22%
County	Hampden	624	29%
County	Hampshire	331	26%
	Middlesex	2473	28%
	Nantucket	23	28%
	Norfolk	1025	27%
	Plymouth	451	27%
	Suffolk	1131	34%
	Worcester	982	25%

Preliminary analysis. Statistical significance testing forthcoming.

Note: All percentages presented here (except County) are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts

Data presented at sub-state geographies (county, rural cluster, municipality) were NOT weighted to the statewide age and educational distribution of those 25 years or older in MA since the age and educational distributions within those geographies may be different than the statewide distribution.

Unweighted percentages should NOT be compared to weighted percentages.

nH/nL = non-Hispanic/non-Latinx;

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

Questioning/undecided/non-binary gender identity includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

% Not Able to Keep 6 ft. Distance when Outside the Home

	Demographics	Frequency	Weighted %
	Overall	3559	11%
	American Indian/Alaska Native	47	15%
	Hispanic/Latinx	228	10%
Dans /	Multiracial, nH/nL Asian/Pacific Islander,	64	15%
Race/ Ethnicity	nH/nL	132	12%
	Black, nH/nL	99	9%
	White, nH/nL	2901	11%
	Other Race, nH/nL	42	15%
	Unknown Race	46	17%
	25-34	963	17%
A = 0	35-44	994	12%
Age	45-64	1304	10%
	65+	298	6%
	Male	633	11%
Gender	Female	2754	10%
Identity	Questioning, Undecided, Non-binary	98	26%
	Asexual	61	10%
	Bisexual and/or Pansexual	240	19%
Sexual	Gay or Lesbian	168	14%
Orientation	Straight (Heterosexual)	2787	10%
	Queer	87	20%
	I am questioning / not sure of my sexuality	39	19%

	Demographics	Frequency	Weighted %
	Of transgender		
Transgender	experience	54	22%
Experience	Not of transgender		
	experience	3358	11%
	<\$35K	473	12%
	\$35-74,999K	834	11%
Income	\$75-99,999K	497	11%
	\$100-149,999K	729	11%
	\$150K+	832	10%
	Less than high		
	school	36	9%
	High school or GED	187	8%
	Trade/ vocational		
Educational Attainment	school	107	12%
Attainment	Some college	319	12%
	Associates Degree	258	10%
	Bachelors Degree	1189	12%
	Graduate Degree	1457	11%
	Deaf/Hard of		
	hearing	106	11%
	Blind/Vision		
	Impairment	45	20%
Disability	Cognitive Disability	341	21%
	Mobility Disability	179	10%
	Self-		
	care/independent		
	living disability	143	16%
English	Speaks language		
language	other than English	481	10%

	Demographics	Frequency	Unweighted %
	Barnstable	80	11%
	Berkshire	59	9%
	Bristol	193	11%
	Dukes	9	7%
	Essex	334	11%
	Franklin	101	10%
County	Hampden	202	10%
County	Hampshire	132	11%
	Middlesex	1022	12%
	Nantucket	11	13%
	Norfolk	357	9%
	Plymouth	180	11%
	Suffolk	462	14%
	Worcester	408	11%

Preliminary analysis. Statistical significance testing forthcoming.

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Unweighted percentages should NOT be compared to weighted percentages.

nH/nL = non-Hispanic/non-Latinx;

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

Questioning/undecided/non-binary gender identity includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

% Working Outside of the Home among Employed Residents by Demographics

	Demographics	Frequency	Weighted %
	Overall	8786	52%
	American Indian/Alaska Native	84	57%
	Hispanic/Latinx	650	57%
	Multiracial, nH/nL	97	44%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	252	43%
,	Black, nH/nL	300	53%
	White, nH/nL	7222	51%
	Other Race, nH/nL	92	65%
	Unknown Race	89	58%
	25-34	1377	46%
0 ()	35-44	2167	48%
Age (years)	45-64	4508	55%
	65+	734	58%
	Male	1734	55%
Gender	Female	6832	51%
Identity	Questioning, Undecided, Non-binary	76	43%
	Asexual	186	64%
	Bisexual and/or Pansexual	255	36%
Sexual	Gay or Lesbian	349	47%
Orientation	Straight (Heterosexual)	7403	52%
	Queer	76	33%
	I am questioning / not sure of my sexuality	51	52%

	Demographics	Frequency	Weighted %
Transgender	Of transgender experience	46	42%
Experience	Not of transgender experience	8419	52%
	<\$35K	892	73%
	\$35-74,999K	1979	56%
Income	\$75-99,999K	1217	50%
	\$100-149,999K	1890	48%
	\$150K+	2329	41%
	Less than high school	68	87%
	High school or GED 657		73%
Educational Attainment	Trade/ vocational school	300	75%
Attainment	Some college 789		58%
	Associates Degree	812	63%
	Bachelors Degree	2658	42%
	Graduate Degree 3486		38%
	Deaf/Hard of hearing	165	55%
	Blind/ People with vision impairment	32	58%
Disability	Cognitive disability	297	56%
	Mobility disability	221	53%
	Self-care/ Independent-living disability	99	59%
English language	Speaks language other than English	1314	56%

	Demographics	Frequency	Unweighted %
	Barnstable	253	58%
	Berkshire	242	64%
	Bristol	608	56%
	Dukes	37	54%
	Essex	886	47%
	Franklin	292	53%
	Hampden	676	50%
County	Hampshire	321	41%
	Middlesex	1966	37%
	Nantucket	32	73%
	Norfolk	1008	44%
	Plymouth	535	53%
	Suffolk	767	37%
	Worcester	1143	48%

Preliminary analysis. Statistical significance testing forthcoming.

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Unweighted percentages should NOT be compared to weighted percentages.

nH/nL = non-Hispanic/non-Latinx;

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

Questioning/undecided/non-binary gender identity includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

% Working Outside of the Home among Employed Residents by Industry Group

% Working Outside of the	Industry Group	Frequency	Weighted %
Home among Employed	All Industries	8786	52%
Residents by Industry Group	Construction	132	73%
	Manufacturing	221	50%
	Retail: Grocery	100	94%
	Retail: All Other	266	74%
	Transportation & Warehousing	107	83%
	Finance & Insurance	132	21%
	Real Estate & Rental & Leasing	133	74%
	Professional, Scientific, & Technical Services	300	25%
	Admin. & Support & Waste Mgmt & Remed. Svcs	83	58%
	Education: Elementary & Secondary Schools	1593	64%
	Education: Colleges & Universities	140	15%
	Education: All Other	39	57%
	Healthcare: Ambulatory Services	895	52%
	Healthcare: Hospitals	1230	67%
	Healthcare: Nursing & Residential Care Facilities	314	88%
	Social Assistance: Childcare	306	79%
Notes: 1) Industry groups are based on Bureau of Census Industry Codes (CIC); 2) "Retail: Grocery" includes Grocery	Social Assistance: All Other	426	34%
Stores, Specialty Food Stores, Gas Stations [includes those with convenient stores]; 3) Other Industries	Arts, Entertainment, & Recreation	140	75%
includes Mining; Agriculture, Forestry, Fishing and Hunting;	Accommodation (e.g. hotel, motel, boarding house)	27	91%
Utilities; Wholesale Trade; Management of Companies and Enterprises; Military; 4) Preliminary findings -	Food Services	113	87%
statistical significance testing forthcoming; 5)Percentages are weighted to the statewide age and educational	Other Services (Except Public Administration)	382	44%
distribution of those 25 years old or older in Massachusetts	Public Administration	689	47%
	Other Industries	69	55%

% with Employerprovided Protective Measures among Adults Working Outside the Home by Industry Group

Notes: 1) Industry groups are based on Bureau of Census Industry Codes (CIC); 2) "Retail: Grocery" includes Grocery Stores, Specialty Food Stores, Gas Stations [includes those with convenient stores]; 3) "Other Industries" includes Mining; Agriculture, Forestry, Fishing and Hunting; Utilities; Wholesale Trade; Management of Companies and Enterprises; Military; 4) Estimates for "Education: All Other" and "Accommodation" were suppressed due to insufficient data; 5) Preliminary findings - statistical significance testing forthcoming; 6) Percentages are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts

	Personal F Equipme				Additional Health and Safety Training		Sick Leave	
Industry Group	Frequency	Weighted %	Frequency	Weighted %	Frequency	Weighted %	Frequency	Weighted %
All Industries	5559	76%	5038	66%	3424	44%	5978	80%
Construction	63	73%	50	52%	21	22%	70	73%
Manufacturing	141	71%	148	72%	82	39%	164	83%
Retail: Grocery	69	74%	57	58%	33	37%	53	59%
Retail: All Other	132	71%	119	63%	62	32%	132	68%
Transportation & Warehousing	65	73%	57	63%	28	29%	62	69%
Finance & Insurance	65	63%	74	70%	30	24%	91	86%
Real Estate & Rental & Leasing	36	66%	39	73%	17	38%	39	72%
Professional, Scientific, & Technical Services	81	61%	96	67%	34	23%	98	68%
Admin. & Support & Waste Mgmt & Remed. Svcs	20	50%	23	53%	7	24%	24	56%
Education: Elementary & Secondary Schools	1062	70%	1227	78%	917	58%	1341	86%
Education: Colleges & Universities	75	64%	104	79%	66	49%	102	79%
Healthcare: Ambulatory Services	624	82%	490	64%	357	46%	590	77%
Healthcare: Hospitals	1130	91%	768	60%	652	52%	1025	84%
Healthcare: Nursing & Residential Care Facilities	271	88%	195	64%	193	62%	248	79%
Social Assistance: Childcare	182	77%	149	63%	141	56%	188	80%
Social Assistance: All Other	331	82%	309	74%	203	47%	354	87%
Arts, Entertainment, & Recreation	37	64%	38	78%	12	26%	30	60%
Food Services	50	58%	49	57%	31	34%	37	37%
Other Services (Except Public Administration)	165	62%	164	58%	88	33%	196	70%
Public Administration	506	75%	445	66%	231	32%	610	92%
Other Industries	42	73%	37	63%	25	45%	46	91%



TESTING ACCESS

% Ever been Tested for COVID-19

	Demographics	Frequency	Weighted %
	Overall	14319	44%
	American Indian/Alaska Native	164	52%
	Hispanic/Latinx	1156	51%
	Multiracial, nH/nL	226	48%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	421	37%
•	Black, nH/nL	544	52%
	White, nH/nL	11551	42%
	Other Race, nH/nL	139	47%
	Unknown Race	118	35%
	25-34	2923	52%
0	35-44	3590	43%
Age	45-64	5924	44%
	65+	1882	36%
	Male	2667	43%
Gender	Female	11267	44%
Identity	Questioning, Undecided, Non- binary	207	53%
	Asexual	248	42%
	Bisexual and/or Pansexual	629	50%
Sexual	Gay or Lesbian	690	54%
Orientation	Straight (Heterosexual)	11717	43%
	Queer	272	61%
	I am questioning / not sure of my sexuality	108	52%

Demographics	Frequency	Weighted %
Of transgender experience	133	57%
Not of transgender experience	13731	44%
<\$35K	1607	41%
\$35-74,999K	3125	46%
\$75-99,999K	1892	44%
\$100-149,999K	2898	44%
\$150K+	4013	45%
Less than high school	142	40%
High school or GED	815	39%
Trade/ vocational school	360	42%
Some college	1125	43%
Associates Degree	1039	44%
Bachelors Degree	4438	45%
Graduate Degree	6377	47%
Deaf/Hard of hearing	396	44%
Blind/ People with vision impairment	103	46%
Cognitive disability	746	48%
Mobility disability	675	45%
Self-care/ Independent-living disability	363	42%
Speaks language other than English	2233	47%
	Of transgender experience Not of transgender experience <\$35K \$35-74,999K \$75-99,999K \$100-149,999K \$150K+ Less than high school or GED Trade/ vocational school Some college Associates Degree Bachelors Degree Graduate Degree Deaf/Hard of hearing Blind/ People with vision impairment Cognitive disability Mobility disability Self-care/ Independent-living disability Speaks language	Of transgender experience Not of transgender experience <\$35K \$35-74,999K \$125 \$75-99,999K \$1892 \$100-149,999K \$150K+ Less than high school or GED High school or GED Trade/ vocational school Some college Associates Degree Associates Degree Bachelors Degree Graduate Degree Blind/ People with vision impairment Cognitive disability Self-care/ Independent-living disability Speaks language 1373 18731 18731 18731 18731 1892 2898 4013 4013 4013 402 815 746 815 746 815 746 746 746 746 746 746 746

	Demographics	Frequency	Unweighted %
	Barnstable	264	35%
	Berkshire	227	37%
	Bristol	726	41%
	Dukes	75	62%
	Essex	1460	48%
	Franklin	416	43%
County	Hampden	865	41%
County	Hampshire	533	43%
	Middlesex	4075	48%
	Nantucket	32	39%
	Norfolk	1579	42%
	Plymouth	643	39%
	Suffolk	1916	58%
	Worcester	1474	39%

Preliminary analysis. Statistical significance testing forthcoming.

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3.10.21 release



HEALTH CARE ACCESS & DELAYS

% Who have not gotten the medical care that they needed since July 2020

	Demographics	Frequency	Weighted %
	Overall	4326	17%
	American Indian/Alaska Native	71	30%
	Hispanic/Latinx	252	15%
	Multiracial, nH/nL	84	26%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	118	16%
'	Black, nH/nL	140	20%
	White, nH/nL	3548	17%
	Other Race, nH/nL	42	17%
	Unknown Race	71	30%
	25-34	908	23%
	35-44	1148	19%
Age	45-64	1764	17%
	65+	506	12%
	Male	682	15%
Gender	Female	3424	17%
Identity	Questioning, Undecided, Non- binary	109	40%
	Asexual	70	15%
	Bisexual and/or Pansexual	291	30%
Sexual	Gay or Lesbian	186	18%
Orientation	Straight (Heterosexual)	3378	16%
	Queer	113	34%
	I am questioning / not sure of my sexuality	42	31%

	Demographics	Frequency	Weighted %
Transgender	Of transgender experience	64	34%
Experience	Not of transgender experience	4064	17%
	<\$35K	631	20%
	\$35-74,999K	978	18%
Income	\$75-99,999K	602	17%
	\$100-149,999K	798	15%
	\$150K+	1057	15%
	Less than high school	41	16%
	High school or GED	220	13%
Educational	Trade/ vocational school	121	19%
Attainment	Some college	378	19%
	Associates Degree	319	18%
	Bachelors Degree	1382	18%
	Graduate Degree	1859	17%
	Deaf/Hard of hearing	155	18%
	Blind/ People with vision impairment	57	34%
Disability	Cognitive disability	436	31%
	Mobility disability	349	24%
	Self-care/ Independent-living disability	253	32%
English language	Speaks language other than English	584	16%

	Demographics	Frequency	Unweighted %
	Barnstable	128	21%
 -	Berkshire	72	15%
	Bristol	206	15%
 -	Dukes	22	25%
<u> </u>	Essex	342	14%
 	Franklin	150	19%
County	Hampden	267	17%
County	Hampshire	167	16%
 	Middlesex	1304	19%
 	Nantucket	9	16%
 	Norfolk	407	14%
	Plymouth	246	19%
 	Suffolk	508	20%
	Worcester	489	16%

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American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

% 15 or more Poor Mental Health Days in past 30 Days

	Demographics	Frequency	Weighted %
	Overall	8973	33%
	American Indian/Alaska Native	113	38%
	Hispanic/Latinx	654	35%
	Multiracial, nH/nL	165	49%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	221	25%
•	Black, nH/nL	285	32%
	White, nH/nL	7346	33%
	Other Race, nH/nL	91	29%
	Unknown Race	98	40%
	25-34	1999	43%
A ===	35-44	2772	41%
Age	45-64	3466	31%
	65+	736	20%
	Male	1333	26%
Gender	Female	7264	34%
Identity	Questioning, Undecided, Non- binary	221	68%
	Asexual	202	39%
	Bisexual and/or Pansexual	580	55%
Covual	Gay or Lesbian	439	41%
Sexual Orientation	Straight (Heterosexual)	6994	31%
	Queer	246	59%
3. i 0.2 i rejea	I am questioning / not sure of my sexuality	100	58%

	<u> </u>		
	Demographics	Frequency	Weighted %
Transgender	Of transgender experience	134	62%
Experience	Not of transgender experience	8480	33%
	<\$35K	1312	42%
	\$35-74,999K	2163	35%
Income	\$75-99,999K	1302	33%
	\$100-149,999K	1792	31%
	\$150K+	1998	26%
	Less than high school	104	36%
	High school or GED 543		32%
Educational Attainment	Trade/ vocational school	245	33%
	Some college	859	38%
	Associates Degree	686	35%
	Bachelors Degree	2884	32%
	Graduate Degree	3646	29%
	Deaf/Hard of hearing	237	34%
	Blind/ People with vision impairment	83	49%
Disability	Cognitive disability	989	72%
	Mobility disability	565	44%
	Self-care/ Independent-living disability	410	56%
English language	Speaks language other than English	1279	34%

	Demographics	Frequency	Unweighted %
	Barnstable	199	30%
	Berkshire	199	36%
	Bristol	451	30%
	Dukes	30	29%
	Essex	886	33%
	Franklin	304	35%
County	Hampden	671	36%
County	Hampshire	397	35%
	Middlesex	2423	32%
	Nantucket	12	18%
	Norfolk	929	29%
	Plymouth	493	35%
	Suffolk	966	34%
	Worcester	987	30%

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SOCIAL DETERMINANTS OF HEALTH

% Worried about paying for 1 or more types* of expense or bills in the coming few weeks

	Demographics	Frequency	Weighted %		Demographics	Frequency	Weighted %		Demographics	Frequency	Unweighted %
		11679	44%		Of transgender				Barnstable	151	21%
1	Overall		44/0	Transgender	experience	131	61%		Berkshire	174	29%
1	American Indian/Alaska	180	62%	Experience	Not of transgender	!			Bristol	409	24%
'	Native				experience	11044	43%		Dukes	23	20%
'l -	Hispanic/Latinx	1386	70%		<\$35K	2318	67%		Essex	821	28%
'l - L	Multiracial, nH/nL	213	61%		\$35-74,999K	3393	52%		Franklin	216	23%
Race/	Asian/Pacific Islander,	413	48%	Income	\$75-99,999K	1659	41%	County	Hampden	647	32%
Ethnicity	nH/nL	C52	600/		\$100-149,999K	2067	35%	County	Hampshire	249	21%
'l -	Black, nH/nL	652	69%		\$150K+	1618	21%	1	Middlesex	1485	18%
'	White, nH/nL	8538	38%		Less than high	1]]	1	Nantucket	23	30%
' <u>[</u>	Other Race, nH/nL	139	55%		school	245	71%	1	Norfolk	729	20%
	Unknown Race	158	56%		High school or GED	1044	50%	1	Plymouth	436	27%
	25-34	2585	57%	Educational	Trade/ vocational	1]	1	Suffolk	878	28%
1 400	35-44	3358	52%	Attainment	school	442	51%		Worcester	774	21%
Age	45-64	4814	44%	Attailinent	Some college	1382	53%		-	-	
<u> </u>	65+	922	25%		Associates Degree	1094	47%	D	hada Otalian L. 17		_
	Male	1975	40%		Bachelors Degree	3708	38%	Preliminary ana	llysis. Statistical significance t	esting forthcomin	g.
Gender	Female	9265	44%		Graduate Degree	3745	28%		ntages presented here (excep and educational distribution of		
Identity	Questioning, Undecided, Non-binary	209	65%		Deaf/Hard of hearing	307	39%	in Massachuset		·	
	Asexual	290	52%		Blind/ People with		[<u></u> [municipality) we	ere NOT weighted to the state	wide age and edu	ucational
ή [Bisexual and/or	567	55%		vision impairment	126	68%		nose 25 years or older in MA s tributions within those geogra		
Sexual	Pansexual Gay or Loshian	462	55% 44%	Disability	Cognitive disability	982	71%	the statewide di	istribution.		
Orientation	Gay or Lesbian	9297	44%		Mobility disability	787	55%	Unweighted per percentages.	rcentages should NOT be con	npared to weighte	·d
	Straight (Heterosexual) Queer	214	55%		Self-care/	/8/	33%	* Types of expenses include: Housing (Rent, mortgage, property taxes, condingurance)			_
	I am questioning / not				Independent-living	1]]			taxes, condo fee	s, housing
	sure of my sexuality	98	58%		disability	522	65%	 Utilities: 	: Cable, cell, electricity, wat		
3.10.21 release				English	Speaks language			 Debt: Credit card debt, student loan debt, bank fees School tuition / Daycare cost 			
nH/nL = non-Hispar	nic/non-Latinx;			language	other than English	1788	64%	 Vehicle: 	·		
American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx Questioning/undecided/non-binary gender identity includes respondents identifying as non- questioning/unsure of their gender identity				ninary, genderqueer, n	ot exclusively male or female, a	and		InsuranceOthers	ce: Health insurance, disabil	ity insurance, life	e insurance

% Worried about getting food or groceries in the coming weeks

	Demographics	Frequency	Weighted %
	Overall	6784	28%
	American Indian/Alaska Native	118	45%
	Hispanic/Latinx	891	49%
	Multiracial, nH/nL	116	38%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	263	32%
•	Black, nH/nL	361	41%
	White, nH/nL	4867	24%
	Other Race, nH/nL	85	33%
	Unknown Race	83	34%
	25-34	1215	31%
_	35-44	1844	31%
Age	45-64	2892	28%
	65+	833	22%
	Male	1231	25%
Gender	Female	5311	28%
Identity	Questioning, Undecided, Non-binary	102	34%
	Asexual	186	36%
	Bisexual and/or Pansexual	275	31%
Sexual Orientation	Gay or Lesbian	245	26%
Orientation	Straight (Heterosexual)	5445	27%
	Queer	99	26%
	I am questioning / not sure of my sexuality	48	32%

	Demographics	Frequency	Weighted %
	Of transgender		
Transgender	experience	68	37%
Experience	Not of transgender		
	experience	6405	27%
	<\$35K	1566	48%
	\$35-74,999K	1840	31%
Income	\$75-99,999K	829	23%
	\$100-149,999K	1025	19%
	\$150K+	1013	13%
	Less than high school	191	56%
	High school or GED	760	37%
Educational	Trade/ vocational school	308	37%
Attainment	Some college	890	35%
	Associates Degree	694	31%
	Bachelors Degree	2050	21%
	Graduate Degree	1877	14%
	Deaf/Hard of hearing	243	34%
	Blind/ People with vision impairment	103	53%
Disability	Cognitive disability	684	53%
	Mobility disability	614	45%
	Self-care/		
	Independent-living disability	423	53%
English language	Speaks language other than English	1582	44%

	Demographics	Frequency	Unweighted %
	Barnstable	164	23%
	Berkshire	165	28%
	Bristol	440	26%
	Dukes	33	28%
	Essex	763	26%
	Franklin	217	23%
Country	Hampden	632	31%
County	Hampshire	211	17%
	Middlesex	1458	18%
	Nantucket	18	23%
	Norfolk	666	19%
	Plymouth	393	25%
	Suffolk	762	24%
	Worcester	844	23%

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% Worried about getting face masks in the coming weeks

	Demographics	Frequency	Weighted %
	Overall	3787	14%
	American Indian/Alaska Native	70	24%
	Hispanic/Latinx	512	26%
	Multiracial, nH/nL	83	24%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	216	24%
•	Black, nH/nL	250	27%
	White, nH/nL	2550	12%
	Other Race, nH/nL	50	20%
	Unknown Race	56	20%
	25-34	774	18%
_	35-44	975	16%
Age	45-64	1586	15%
	65+	452	11%
	Male	695	13%
Gender	Female	2951	15%
Identity	Questioning, Undecided, Non-binary	58	18%
	Asexual	105	20%
	Bisexual and/or Pansexual	161	15%
Sexual	Gay or Lesbian	151	14%
Orientation	Straight (Heterosexual)	3004	14%
	Queer	53	12%
	I am questioning / not sure of my sexuality	32	21%

	Demographics	Weighted %	
	Of transgender		
Transgender	experience	36	16%
Experience	Not of transgender		
	experience	3557	14%
	<\$35K	810	25%
	\$35-74,999K	1014	16%
Income	\$75-99,999K	514	13%
	\$100-149,999K	587	10%
	\$150K+	591	7%
	Less than high		
	school	108	31%
	High school or GED	342	17%
Educational	Trade/ vocational		
Attainment	school	147	17%
Attailinent	Some college 430		17%
	Associates Degree	385	17%
	Bachelors Degree	1116	11%
	Graduate Degree	1247	9%
	Deaf/Hard of		
	hearing	138	19%
	Blind/ People with		
	vision impairment	57	31%
Disability	Cognitive disability	369	27%
	Mobility disability	351	25%
	Self-care/		
	Independent-living		
	disability	253	32%
English	Speaks language		
language	other than English	1017	26%

	Demographics	Frequency	Unweighted %
	Barnstable	79	11%
	Berkshire	76	13%
	Bristol	224	13%
	Dukes	12	10%
	Essex	394	13%
	Franklin	94	10%
C	Hampden	349	17%
County	Hampshire	114	9%
	Middlesex	900	11%
	Nantucket	8	10%
	Norfolk	387	11%
	Plymouth	211	13%
	Suffolk	515	16%
	Worcester	414	11%

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American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

% Worried about getting medication in the coming weeks

	Demographics	Frequency	Weighted %
	Overall	3535	14%
	American Indian/Alaska Native	69	25%
	Hispanic/Latinx	424	22%
	Multiracial, nH/nL	72	21%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	140	15%
•	Black, nH/nL	136	14%
	White, nH/nL	2605	12%
	Other Race, nH/nL	40	13%
	Unknown Race	49	20%
	25-34	640	15%
	35-44	901	14%
Age	45-64	1556	14%
	65+	438	11%
	Male	670	13%
Gender	Female	2707	13%
Identity	Questioning, Undecided, Non-binary	75	23%
	Asexual	90	17%
	Bisexual and/or Pansexual	184	19%
Sexual	Gay or Lesbian	147	15%
Orientation	Straight (Heterosexual)	2791	13%
	Queer	72	19%
	I am questioning / not sure of my sexuality	30	17%

	Demographics	Frequency	Weighted %
	Of transgender		
Transgender	experience	61	30%
Experience	Not of transgender		
	experience	3308	13%
	<\$35K	715	22%
	\$35-74,999K	927	15%
Income	\$75-99,999K	469	12%
	\$100-149,999K	561	10%
	\$150K+	619	8%
	Less than high school	90	27%
	High school or GED	322	16%
Educational Attainment	Trade/ vocational school	153	18%
	Some college	424	16%
	Associates Degree	329	15%
	Bachelors Degree	1077	11%
	Graduate Degree	1131	9%
	Deaf/Hard of		
	hearing	136	20%
	Blind/ People with vision impairment	66	35%
Disability	Cognitive disability	446	33%
	Mobility disability	388	27%
	Self-care/ Independent-living disability	272	34%
English	Speaks language		

other than English

language

761

20%

graphics	Frequency	Unweighted %
ole	80	11%
e	90	15%
	221	13%
	16	14%
	345	12%
n	104	11%
den	357	18%
shire	124	10%
esex	848	10%
cket	12	16%
k	349	10%
uth	218	14%
(378	12%
ster	385	10%
	n den shire esex cket k	90 221 16 345 n 104 den 357 shire 124 esex 848 cket 12 k 349 uth 218 k 378

Preliminary analysis. Statistical significance testing forthcoming.

Note: All percentages presented here (except County) are weighted to the statewide age and educational distribution of those 25 years old or older in Massachusetts

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Unweighted percentages should NOT be compared to weighted percentages.

nH/nL = non-Hispanic/non-Latinx;

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

% Worried about getting <u>broadband(internet)</u> in the coming weeks

	Demographics	Frequency	Weighted %
	Overall	3434	13%
	American Indian/Alaska Native	75	25%
	Hispanic/Latinx	471	24%
	Multiracial, nH/nL	73	22%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	143	16%
,	Black, nH/nL	198	21%
	White, nH/nL	2384	11%
	Other Race, nH/nL	47	19%
	Unknown Race	43	16%
	25-34	580	14%
	35-44	904	15%
Age	45-64	1502	14%
	65+	448	10%
	Male	589	12%
Gender	Female	2711	13%
Identity	Questioning, Undecided, Non-binary	58	16%
	Asexual	93	16%
	Bisexual and/or Pansexual	140	16%
Sexual Orientation	Gay or Lesbian	128	12%
Orientation	Straight (Heterosexual)	2739	13%
	Queer	52	12%
	I am questioning / not sure of my sexuality	27	17%

	Demographics	Frequency	Weighted %
	Of transgender		
Transgender	experience	41	18%
Experience	Not of transgender		
	experience	3217	13%
	<\$35K	738	23%
	\$35-74,999K	941	15%
Income	\$75-99,999K	460	12%
	\$100-149,999K	558	9%
	\$150K+	512	6%
	Less than high school	76	21%
	High school or GED	326	16%
Educational	Trade/ vocational school	148	17%
Attainment		417	16%
	Some college	339	15%
	Associates Degree	1024	10%
	Bachelors Degree	1024	8%
	Graduate Degree Deaf/Hard of	1097	070
	hearing	161	21%
	Blind/ People with vision impairment	48	27%
Disability	Cognitive disability	354	27%
	Mobility disability	305	22%
	Self-care/ Independent-living disability	197	25%
English language	Speaks language other than English	871	22%

	Demographics	Frequency	Unweighted %
	Barnstable	81	11%
	Berkshire	113	19%
	Bristol	203	12%
	Dukes	13	11%
	Essex	374	13%
	Franklin	122	13%
C	Hampden	355	18%
County	Hampshire	137	11%
	Middlesex	710	9%
	Nantucket	7	9%
	Norfolk	292	8%
	Plymouth	178	11%
	Suffolk	409	13%
	Worcester	427	12%

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Unweighted percentages should NOT be compared to weighted percentages.

nH/nL = non-Hispanic/non-Latinx;

American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

Questioning/undecided/non-binary gender identity includes respondents identifying as non-binary, genderqueer, not exclusively male or female, and questioning/unsure of their gender identity

3.10.21 release



MENTAL HEALTH

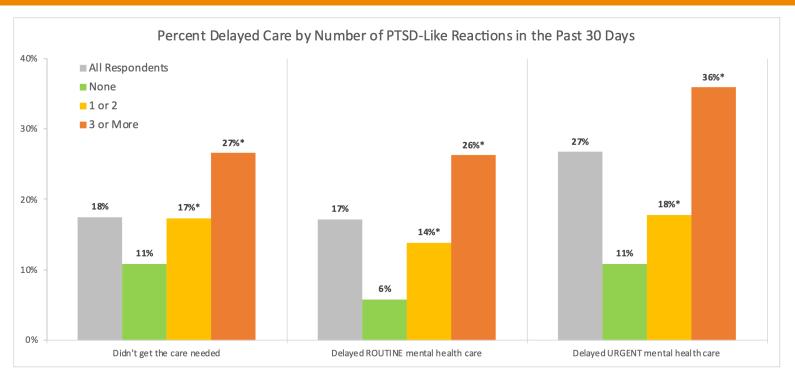
PTSD MENTAL HEALTH INDICATOR

How has the pandemic has impacted all residents' mental health?

- Screening for community-wide post-traumatic stress disorder (PTSD) has been done in past community surveys that assessed populations' reactions to a natural disasters, epidemics, and other traumatic events
- The CCIS question was adapted from "Primary Care PTSD Screen for DSM-5 (PC-PTSD-5),"
 a screening tool developed for use in primary care settings for determining if referral for
 PTSD (due to any traumatic experience) might be advisable
- In figures, this variable is labeled as "3+ PTSD-like reactions"
- Respondents were asked how many times they had any of the following reactions to the COVID-19 outbreak in the past month:
 - Having nightmares or thinking about it when you didn't want to
 - Going out of your way to avoid situations
 - Constantly being on guard, watchful, or easily startled
 - Feeling numb or detached
 - Feeling guilty or unable to stop blaming yourself
- Reference: Prins, A., Bovin, M. J., Kimerling, R., Kaloupek, D. G, Marx, B. P., Pless Kaiser, A., & Schnurr, P. P. (2015). Primary Care PTSD Screen for DSM-5 (PC-PTSD-5)
 [Measurement instrument]. Available from https://www.ptsd.va.gov

DELAY IN HEALTH CARE

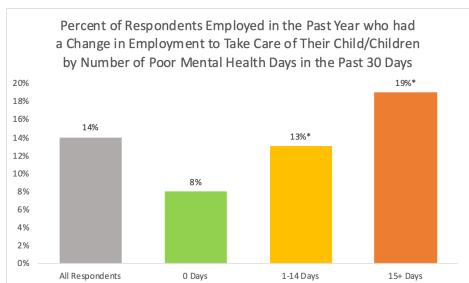
Respondents who reported having any PTSD-like reactions were more likely to experience delayed care, including <u>routine</u> and <u>urgent mental health care</u>, compared to those who reported having no PTSD-like reactions.

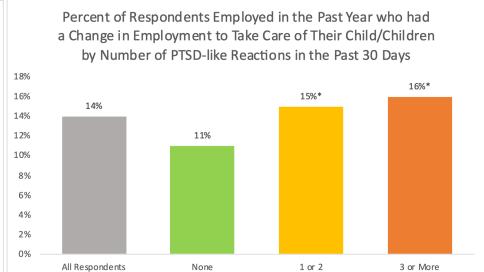


^{*} subgroup is significantly different compared to respondents with 0 poor mental health days at the p<0.05 level

CHANGE IN EMPLOYMENT OR JOB NATURE - CHILDCARE

Across both mental health indicators, respondents who experienced poor mental health were more likely to have a change in employment to take care of their child/children compared to those who reported no experiences of poor mental health.



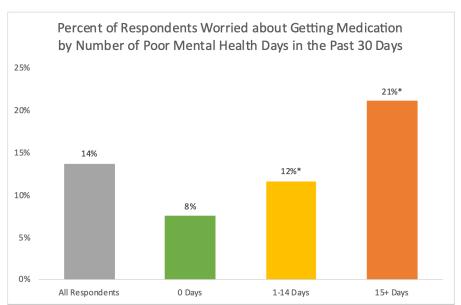


^{*} Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

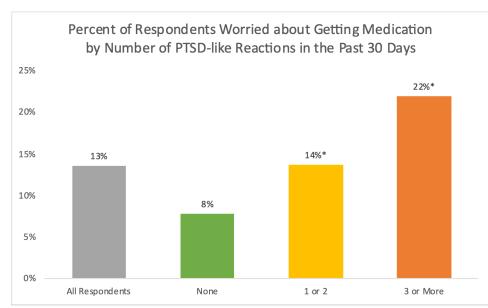
^{*} Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

WORRIED ABOUT GETTING MEDICATION

Across both mental health indicators, respondents who experienced poor mental health were more likely to be worried about getting medication compared to those who reported no experiences of poor mental health.



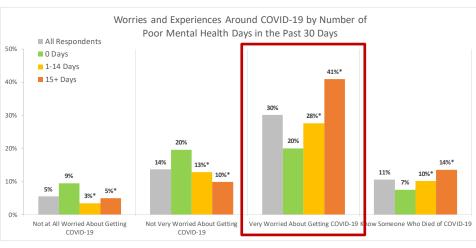
* Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

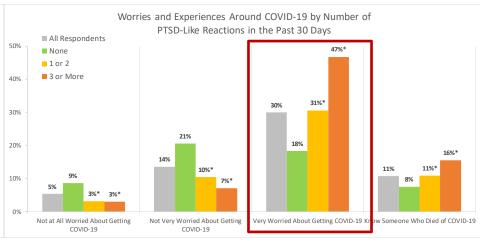


^{*} Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

WORRIES AND EXPERIENCES AROUND COVID

Across both mental health indicators, the proportion of respondents who are "very worried about getting COVID-19" is highest among those experiencing poor mental health. They are also more likely to know someone close to them who died of COVID-19.



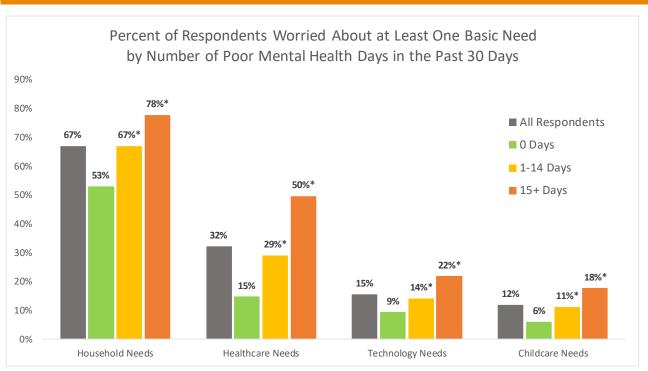


 $^{^{\}star}$ Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

^{*} Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

WORRIED ABOUT BASIC NEEDS

Respondents who reported any days of poor mental health were more likely to worry about basic needs compared to those reporting 0 days of poor mental health.



TOP BASIC NEEDS WORRIED ABOUT BY RESPONDENTS WITH POOR MENTAL HEALTH

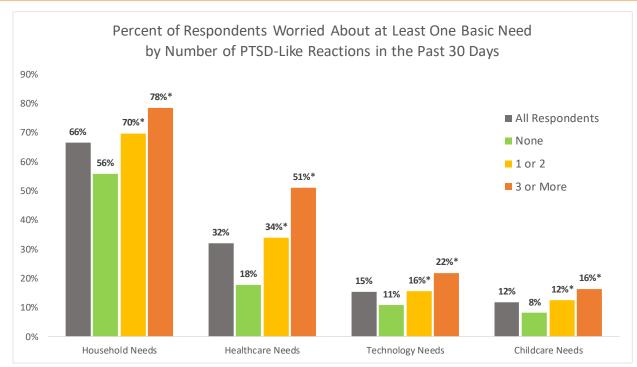
- 1. Cleaning Products (56%)
- 2. Free/Cheaper Food and Other Supplies (42%)
- 3. Paper Products (41%)
- 4. Food or Groceries (40%)
- 5. Mental or Emotional Support (33%)

87

^{*} Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

WORRIED ABOUT BASIC NEEDS

Respondents experiencing any PTSD-like reactions were more likely to worry about basic needs compared to those who experienced no PTSD-like reactions.



TOP BASIC NEEDS WORRIED ABOUT BY RESPONDENTS WITH 3+ PTSD-LIKE REACTIONS

- 1. Cleaning Products (59%)
- 2. Paper Products (42%)
- Free/Cheaper Food and Other Supplies(41%)
- 4. Food or Groceries (40%)
- 5. Mental or Emotional Support (33%)

* Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

88

WORRIED ABOUT EXPENSES

Respondents who reported any days of poor mental health were more likely to worry about paying expenses and bills compared to those who experienced O days of poor mental health.

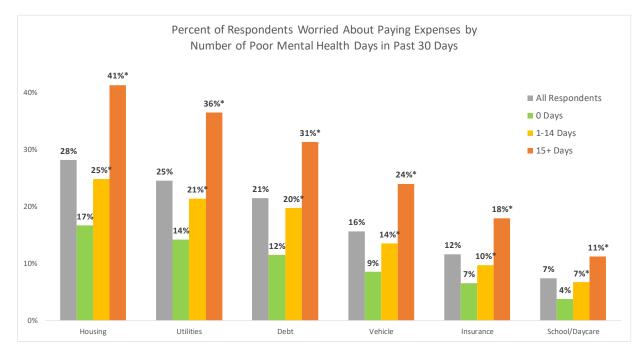
The top expenses people are most concerned about are:

- 1) Housing e.g., Rent, mortgage, property taxes, condo fees, housing insurance
- 2) Utilities e.g., Cable, cell phone, electricity, water, gas, heating
- 3) Debt e.g., Credit card debt, student loan debt, bank fees

Among respondents with poor mental health:

- 60% reported being worried about paying at least one expense
- 45% reported being worried about paying at least two expenses
- 30% reported being worried about paying at least three expenses

Those who experienced 3+ PTSD-like reactions to COVID-19 in the past 30 days had nearly identical proportions of respondents worried about expenses as those with poor mental health



 $^{^{\}star}$ Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

WORRIED ABOUT EXPENSES

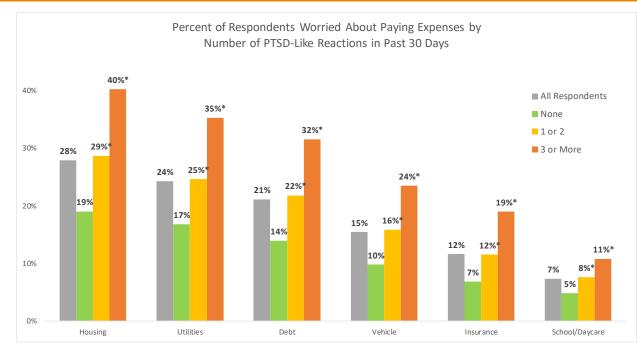
Respondents experiencing any PTSD-like reactions were more likely to worry about paying expenses and bills compared to those who experienced no PTSD-like reactions.

The distribution of those worried about expenses based on the number of PTSD-like reactions is very similar to the distribution by days of poor mental health

Among respondents with 3+ PTSD-like reactions:

- 60% reported being worried about paying at least one expense
- 44% reported being worried about paying at least two expenses
- 30% reported being worried about paying at least three expenses

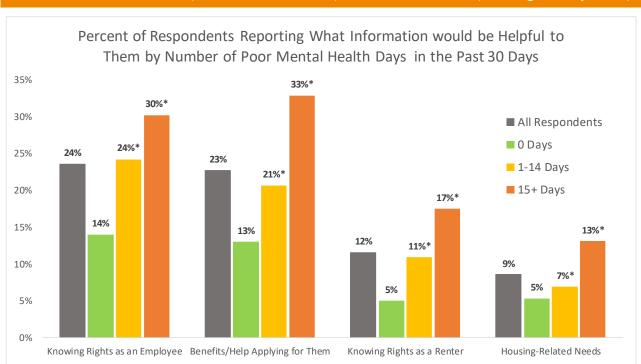
These proportions are nearly identical to ones among those who are experiencing 15+ days of poor mental health



^{*} Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

CONNECTION TO RESOURCES

Respondents who reported any days of poor mental health were more likely to request information that would be helpful to them compared to those reporting 0 days of poor mental health.



Respondents with 15+ days of poor mental health reported 2x –3x higher rates for information that would be helpful to them compared to respondents who reported 0 days of poor mental health.

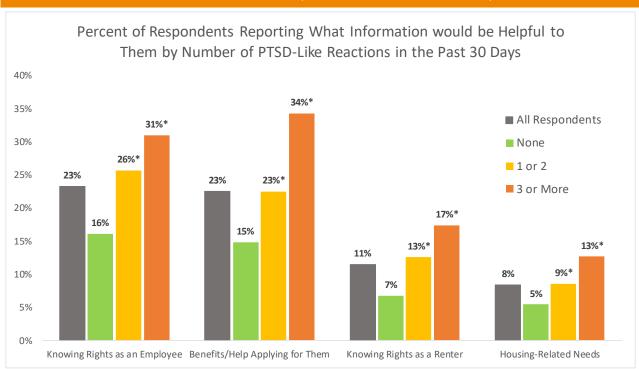
Information that would be most helpful for respondents with poor mental health are:

- 1) Knowing Rights as an Employee
- 2) Benefits & Help Applying for them
- 3) Knowing Rights as renters

^{*} Subgroup is significantly different compared to people with 0 poor mental health days at the p<0.05 level

CONNECTION TO RESOURCES

Respondents experiencing any PTSD-like reactions were more likely to request information that would be helpful to them compared to those who experienced no PTSD-like reactions.



Respondents with 3+ PTSD-like reactions reported 2x –2.5x higher rates for information that would be helpful to them compared to respondents who reported no PTSD-like reactions.

Information that would be most helpful for respondents with poor mental health are:

- 1) Knowing Rights as an Employee
- 2) Benefits & Help Applying for them
- 3) Knowing Rights as renters

^{*} Subgroup is significantly different compared to people with no PTSD-like reactions at the p<0.05 level

% 15 or more Poor Mental Health Days in past 30 Days

	Demographics	Frequency	Weighted %
	Overall	8973	33%
	American Indian/Alaska Native	113	38%
	Hispanic/Latinx	654	35%
	Multiracial, nH/nL	165	49%
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	221	25%
	Black, nH/nL	285	32%
	White, nH/nL	7346	33%
	Other Race, nH/nL	91	29%
	Unknown Race	98	40%
	25-34	1999	43%
A	35-44	2772	41%
Age	45-64	3466	31%
	65+	736	20%
	Male	1333	26%
Gender	Female	7264	34%
Identity	Questioning, Undecided, Non-Binary	221	68%
	Asexual	202	39%
	Bi/Pansexual	580	55%
	Gay or Lesbian	439	41%
Sexual	Heterosexual	6994	31%
Orientation	Queer	246	59%
	I am questioning / not sure of my sexuality	100	58%

	<u> </u>		
	Demographics	Frequency	Weighted %
Tuenenandan	Of Trans Experience	134	62%
Transgender Experience	Not of Trans Experience	8480	33%
	<\$35K	1312	42%
	\$35-74,999K	2163	35%
Income	\$75-99,999K	1302	33%
	\$100-149,999K	1792	31%
	\$150K+	1998	26%
	Less than high school	104	36%
	High school or GED	543	32%
Educational Attainment	Trade/vocational school	245	33%
Attainment	Some college	859	38%
	Associates Degree	686	35%
	Bachelors Degree	2884	32%
	Graduate Degree	3646	29%
	Deaf/Hard of hearing	237	34%
	Blind/Vision Impairment	83	49%
Disability	Cognitive Disability	989	72%
	Mobility Disability	565	44%
	Self-Care/ Independent Living Disability	410	56%
English language	Speaks language other than English	1279	34%

	Demographics	Frequency	Unweighted %
	Barnstable	199	30%
	Berkshire	199	36%
	Bristol	451	30%
	Dukes	30	29%
	Essex	886	33%
	Franklin	304	35%
County	Hampden	671	36%
County	Hampshire	397	35%
	Middlesex	2423	32%
	Nantucket	12	18%
	Norfolk	929	29%
	Plymouth	493	35%
	Suffolk	966	34%
	Worcester	987	30%

Preliminary analysis. Statistical significance testing forthcoming.

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Unweighted percentages should NOT be compared to weighted percentages.

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American Indian/Alaska Native includes respondents who identify as Hispanic/Latinx

% 3 or more PTSD-like reactions in past month

	Demographics	Frequency	Weighted %		
	Overall	7620	27%	Transgender	
	American Indian/Alaska Native	109	39%	Experience	
	Hispanic/Latinx	528	28%		H
	Multiracial, nH/nL	138	41%	Income	H
Race/ Ethnicity	Asian/Pacific Islander, nH/nL	164	20%	liicome	
•	Black, nH/nL	203	24%		H
	White, nH/nL	6312	26%		
	Other Race, nH/nL	73	25%		Г
	Unknown Race	93	37%	l <u></u>	Γ
	25-34	1747	36%	Educational Attainment	
A	35-44	2237	32%	Attaillinent	L
Age	45-64	2966	26%		L
	65+	670	16%		L
	Male	1127	21%		L
Gender	Female	6175	27%		
Identity	Questioning, Undecided, Non-Binary	206	63%		
	Asexual	152	29%	Disability	
	Bi/Pansexual	547	50%		Г
Sexual Orientation	Gay or Lesbian	413	38%		H
	Heterosexual	5870	24%		
	Queer	237	55%		
	I am questioning / not sure of my sexuality	90	54%	English language	

•			
	Demographics	Frequency	Weighted %
Tuonagandau	Of Trans Experience	129	60%
Transgender Experience	Not of Trans Experience	7222	26%
	<\$35K	1021	31%
	\$35-74,999K	1790	29%
Income	\$75-99,999K	1073	26%
	\$100-149,999K	1534	25%
	\$150K+	1837	23%
	Less than high school	74	27%
	High school or GED	400	23%
Educational	Trade/ vocational school	197	26%
Attainment	Some college	642	28%
	Associates Degree	540	26%
	Bachelors Degree	2488	28%
	Graduate Degree	3271	26%
	Deaf/Hard of hearing	201	26%
	Blind/Vision Impairment	69	41%
Disability	Cognitive Disability	785	57%
	Mobility Disability	441	33%
	Self-Care/ Independent Living Disability	335	45%
English language	Speaks language other than English	1016	27%

	Demographics	Frequency	Unweighted %
County	Barnstable	170	25%
	Berkshire	166	31%
	Bristol	385	25%
	Dukes	31	29%
	Essex	770	28%
	Franklin	269	30%
	Hampden	487	27%
	Hampshire	359	32%
	Middlesex	2099	27%
	Nantucket	17	25%
	Norfolk	806	25%
	Plymouth	383	27%
	Suffolk	871	30%
	Worcester	789	23%

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